



VA INFORMATION RESOURCE CENTER

**RESEARCH FINDINGS FROM THE
VA MEDICARE DATA MERGE INITIATIVE:**

Veterans' Enrollment, Access and Use of Medicare
and VA Health Services (XVA 69-001)

Report to the Under Secretary for Health
Department of Veteran Affairs

SEPTEMBER 2003

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Executive Summary

Background

In order to provide the best quality and most cost-effective healthcare to veterans, we must understand the scope of services provided both inside and outside the VA healthcare system. Information about services provided through Medicare is especially important because of our aging veteran population, several million of whom are eligible for both Medicare and VA health services. Accordingly, the Department of Veterans Affairs' (VA) Under Secretary for Health funded the VA Information Resource Center (VIReC) to conduct a 3-year project to examine veterans' use of Medicare-covered services during fiscal years 1999 through 2002. VIReC is a Health Services Research and Development Service (HSR&D) Resource Center based at the Hines VA Hospital in Hines, IL.

To accomplish this goal, VIReC has dedicated resources to acquire, merge, maintain, analyze, and plan for the internal dissemination of VA and Medicare linked healthcare utilization data sets. For example, the availability of claims data from the Department of Health and Human Services (DHHS), and Centers for Medicare and Medicaid Services (CMS) provide the means of ascertaining Medicare-covered healthcare use by veterans.

One of the specific research aims of this special project was to describe and compare the VA-Medicare dually eligible population in terms of general access to care and healthcare use patterns. The study also describes and compares access to care and healthcare use patterns for two disease-specific populations:

- Most prevalent cancers (prostate, lung, and colorectal cancer), and
- End-stage renal disease (ESRD).

Another research aim was to explore and describe regional variation in veterans' access to and use of VA and Medicare services, by making comparisons across the 22 Veterans Integrated Service Networks (VISNs). Multiple VA data sources were used to identify a cohort of 6.4

million veterans who, from 1997-1999 – used the VA healthcare system (VHA), were enrolled in VHA, or were eligible to use VHA healthcare under a special category designation.

Using 1999 Medicare enrollment and claims data for veterans who were dually eligible for VA and Medicare, VIREC investigators consolidated demographic, healthcare utilization, and claims data across the two systems. They then conducted an analyses of the VA cohort and the dually eligible VA-Medicare population in terms of Medicare enrollment, Medicare Fee-For-Service (FFS) enrollment, and healthcare use nationally, as well as by VISN. In describing healthcare use, individuals were categorized by their healthcare use patterns during calendar year (CY) 1999, as follows:

- used only VA inpatient or outpatient services, or fee-basis care,
- used only Medicare-covered Part A inpatient, skilled nursing, or outpatient care, or Part B physician/supplier services, or
- used both Medicare and VA healthcare services.

Results

Medicare Enrollment

Of the 6.1 million veterans identified as alive on 1/1/99, 2.6 million (42.2%) were dually eligible for VA and Medicare in 1999. Of these 6.1 million veterans,

- 6.8% of veterans *less than 50 years old* were enrolled in Medicare.
- 17.8% of veterans *50 to 64 years old* were enrolled in Medicare.
- 89.6% of veterans *at least 65 years old* were enrolled in Medicare.

- 16.2% of *female* veterans were enrolled in Medicare.
- 45.2% of *male* veterans were enrolled in Medicare.

- 47.8% of veterans who lived in *rural* areas were enrolled in Medicare.
- 38.6% of veterans who lived in *urban* areas were enrolled in Medicare.

- The percent of veterans enrolled in Medicare varied across VISNs, ranging from 34.4% in VISN 22 to 48.8% in VISN 4.

Medicare FFS Enrollment

Of the 2.6 million Medicare-enrolled veterans, 16.3% enrolled in a group health plan, also known as a “Medicare+Choice” plan, for at least one month during CY 1999. We were only able to study the 83.7% who remained in Medicare Fee-for-Service (FFS), (approximately 2.1 million veterans) because Medicare claims files contain no data for care received under Medicare+Choice.

Of the 2.6 million Medicare-enrolled veterans, we found that veterans 65 years old and older are enrolled in Medicare+Choice group health plans to a greater extent than those under age 65 (17.9% vs. 8.3%). Veterans who live in urban areas are more likely to be enrolled in Medicare+Choice plans than veterans in rural areas (22.6% vs. 8.9%). There were also strong regional (VISN) differences in Medicare+Choice enrollment (see Figure 2 of the report).

Healthcare Use of Medicare-enrolled Veterans (FFS only)

Of the 2.1 million veterans enrolled in Medicare FFS:

- 21.9% used *only VA* services
 - The percent of veterans using only VA services varied across VISNs, ranging from 15.6% in VISN 14 to 28.7% in VISNs 20 and 22.
- 30.3% used *only Medicare* services
 - The percent of veterans using Medicare only ranged from 23.1% in VISN 18 to 37.8% in VISN 3.
- 42.6% used *both VA and Medicare* services
 - The percent of veterans using both VA and Medicare services ranged from 33.3% in VISN 22 to 52.5% in VISN 14.

Healthcare Use of Medicare-enrolled Veterans (FFS only) with Prostate, Lung, or Colorectal Cancer

We found 217,318 dually eligible veterans in Medicare FFS with a diagnosis of prostate, lung, or colorectal cancer. Of these veterans:

- 5.3% - 8.6% used *only VA* services
 - The percent of veterans with one of these cancers using only VA services varied across VISNs, ranging from 3.2% in VISN 14 to 18.6% in VISN 5.
- 29.3% - 39.3% used *only Medicare* services
 - The percent of veterans with one of these cancers using only Medicare services ranged from 22.5% in VISN 15 to 44.9% in VISN 1.

- 55.1% - 60.0% used both VA and Medicare services
 - The percent of veterans with one of these cancers using both VA and Medicare services ranged from 49.4% in VISN 22 to 66.6% in VISN 14.

Healthcare Use of Medicare-enrolled Veterans (FFS only) with End-Stage Renal Disease

We found 24,466 dually eligible veterans in Medicare FFS with end stage renal disease. Of these veterans, it was found that:

- 9.4% used *only VA* services
 - This number varied across VISNs, ranging from 6.0% in VISN 7 to 17.1% in VISN 22.
- 30.5% used *only Medicare* services
 - The percent of veterans with end stage renal disease using only Medicare services ranged from 21.5% in VISN 9 to 40.1% in VISN 3.
- 60.0% used *both VA and Medicare* services
 - The percent of veterans with end stage renal disease using both VA and Medicare services varied across VISNs, ranging from 51.9% in VISN 3 to 65.3% in VISN 18.

Policy Implications

VA and CMS policy initiatives aimed at affecting national access to care issues need to consider access to healthcare and patterns of use for the overall Medicare-enrolled veteran population to ensure the best healthcare for our nation's veterans. Policy makers also need to consider the differential impacts of geographic regions and VISNs regarding patterns of care for disease-specific populations. In particular, Medicare-enrolled veterans with cancer or ESRD were more likely to have used both VA and Medicare-covered services and were less likely to have used only VA services than all Medicare-enrolled veterans. Any plans for restructuring or coordinating healthcare benefits for veterans should consider the unique aspects of disease subgroups. Additional analysis using risk adjustment techniques and examining the simultaneous impacts of multiple access to care and disease factors on healthcare use patterns, including VA pharmacy use, could also prove to be important for policy decisions.

Our results are consistent with reports from VA's Office of Policy and Planning. Especially in light of new plans underway to develop a VA "Medicare+Choice" option for the Priority 8 veterans enrolled in Medicare, this special project and future analyses by VIREC and other

researchers can help inform health policy discussions between CMS, the VA, and Congress in considering improved healthcare delivery and benefit plans for patients dually eligible for VA and Medicare services.

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Background

Evaluating whether veterans' healthcare needs are being met requires information about the full spectrum of their healthcare use. Information about Medicare-enrolled veterans is especially important because they may require greater healthcare services due to their advancing age and/or disability status. Moreover, the availability of claims data from the Department of Health and Human Services (DHHS), Centers for Medicare and Medicaid Services (CMS), provides the means of ascertaining Medicare-covered healthcare use by veterans.

In 1998, the Department of Veterans Affairs Under Secretary for Health (USH) undertook a special initiative "Medicare Data for Veterans Health Administration: A proposal for acquisition, maintenance and analysis of data," led jointly by the Office of Policy and Planning (OPP) and the Office of Research and Development (ORD). In part motivated by proposed legislation by which the Medicare system would reimburse VA for care given to certain classes of Medicare-enrolled veterans, the new initiative sought to establish infrastructure, mechanisms, and tools to facilitate evaluation of such efforts. Other critical applications for these databases were anticipated in VA planning, cost analysis, and research. With regard to VA planning, according to the OPP, over 85% of the 65 and older VA user population and over 20% of the under 65 VA user population were known to be either Medicare or Department of Defense (DoD) eligible. Also with VHA enrollment efforts, it was strongly felt that the VA must use new data sources containing non-VA utilization to improve estimates of its population's clinical risk as well as to predict future use and needs. These other healthcare systems can provide critical data on the VA's financial risk by helping to measure the enrolled population's historical reliance on VA services. As a result, financial benchmarks can be developed for the Veterans Equitable Resource Allocation (VERA) system and can estimate total healthcare costs (VA and non-VA) for a substantial fraction of its users. Further, if VERA is modified to provide network payment based on enrollees rather than users, these new data sets should provide critical forecasting information on the totality of care needed by veterans.

Previous Research

Critical research applications of these databases were also a motivating factor for this collaborative three-year project. Previous research efforts had already shown that many veterans who obtain healthcare through the Department of Veterans Affairs (VA) also utilize other sources of healthcare. For example, in 1989, it was estimated that 45% of all VA users and 89% of VA users age 65 and older were enrolled in Medicare (Fisher, 1994). Such "dual use" of VA and non-VA care may enhance access, flexibility, and choice in healthcare for veterans. However, use of multiple systems of care can potentially lead to fragmented care that conflicts with the objectives of primary care models, and can make coordination of specialty care very

difficult. Studies of dual use have focused largely on use of Medicare services by VA users, primarily assessing utilization of inpatient care in both systems. Fleming et al. (1992) found that among veterans with prior VA hospitalizations for any condition, rates of Medicare hospitalization during the mid-1980s for 10 surgical procedures, hip fracture, and acute myocardial infarction (AMI) ranged between 17% and 37%. Wright et al. (1997) reported that among all users of VA inpatient or outpatient care nationally, 54% of those subsequently hospitalized for acute myocardial infarctions were admitted to non-VA hospitals covered under Medicare. Another study demonstrated that between 1988 and 1991, among all VA inpatients, 13% had at least one Medicare admission for any diagnosis (Hisnanick, 1994). Receipt of inpatient VA care by veterans enrolled in Medicare HMOs has also been documented (Passman et al., 1997; DeVito et al., 1997).

Much less is known about dual use of outpatient care. Fisher and Welch (1995) estimated that during 1989, 22% of VA users (inpatient or outpatient) received inpatient or outpatient Medicare services. Other estimates of VA patients' use of non-VA outpatient care come primarily from analysis of survey data. Cowper et al. (1993) analyzed the 1987 Survey of Veterans and reported that 22.8% of VA users age 65 and older also received outpatient care from a non-VA source. Other reports indicate that 28% of male Medicare beneficiaries who made outpatient visits to the Miami VA Medical Center in 1992 and 1993 were enrolled in Medicare HMOs (DeVito et al., 1997). Borowsky and Cowper (1999), in their investigation of dual use in four VA hospitals in the Upper Midwest, found that 28% of veterans who reported VA primary care visits also reported primary care visits to non-VA providers. In summary, these earlier research projects document the dual use of Medicare and VA inpatient and outpatient services, making it imperative that in any research or policy examination of veterans' health and healthcare use, Medicare-covered services use should also be included.

Since the initiation of this collaborative project more recent evidence has come to light. A recent analysis by Petersen and colleagues showed that VA patients treated for AMI were as likely as Medicare patients to receive lifesaving medications at discharge (Petersen et al., 2001). This finding suggests that it is also important to examine VA prescription data when studying either population since many veterans enrolled in Medicare may obtain their prescriptions from VA pharmacies. Ongoing research is investigating the impact of co-payment changes on veterans' VA prescription usage and their VA and Medicare healthcare use (Stroupe et al., 2003).

Further, research by Hynes and colleagues that focused on medication practices by ESRD patients showed that if Medicare adopted dosing and route of administration practices demonstrated in a VA clinical trial of erythropoietin, Medicare could save over \$150 million annually in just the cost of this one medication practice change (Hynes et al., 2000). This research also highlighted that for some disease populations, veterans may face different care practices when they choose the VA versus a Medicare provider. Because the ESRD population has a special benefits program with Medicare, veterans' choice and healthcare use of VA versus Medicare providers may differ from veterans in general. Dual use among other disease populations has also been documented, especially in cancer and cardiovascular disease populations (Ramsey et al., 2002; Wright et al., 1997).

Previous access to care research has demonstrated that individual level characteristics impact healthcare use among veterans, including residence in an urban or rural area (Mooney et al., 2000), gender (Hynes et al., 2000; Weaver et al., In Press), age (Wright et al., 1997; Hynes et al., 1998), and whether or not the veteran will be required to pay a co-payment (Smith et al., 1996).

In summary, past and ongoing policy and research studies suggest the importance of considering VA and Medicare use among veterans but further research is needed to more fully understand the impact of veterans' choice and access characteristics on their health and healthcare use. This collaborative project sought to build an infrastructure that would support such future investigations.

Project History and Accomplishments

Having established this collaborative project, the OPP and ORD had specific roles:

- Office of Policy and Planning, Management Science Group (MSG), served as the coordinating center for policy and planning use of the acquired data, establishment of the new systems of records enabling sharing of VA data with other federal agencies, and establishment of interagency agreements.
- Office of Research and Development, Health Services Research and Development Service, VA Information Resource Center (VIREC), served as the coordinating center for research use of the data, including acquiring and merging Medicare data with the VA data. VIREC also conducted an initial research investigation exploring the role of veterans' access characteristics and healthcare use patterns across geographic regions and for specific disease populations.

VIREC accomplished the following during this collaborative project:

- 1) Established roles and responsibilities and plans to achieve objectives through collaborative work with the Office of Policy and Planning, Management Science Group and their Medicare Data Analysis Center;
- 2) Convened a Policy Oversight Committee led by the VA Under Secretary for Health, that provided policy leadership for this initiative;
- 3) Convened and led a Technical Advisory Board (TAB), including experts in management of large VA data systems, researchers experienced in using VA and Medicare data and policy analysts experienced in veterans benefits management. The TAB advised on the information architecture, sampling frame (i.e., finder file), cross-reference file methodology, data linkage methods, and data sharing priorities;
- 4) Developed a method and comprehensive database to identify VHA users, enrollees, and special veteran populations for use in submitting requests for veteran-specific data from CMS, DoD, or other non-VA data sources. This method has now been adopted by the Office of Policy and Planning;
- 5) Participated with OPP in drafting and establishing a system of records for the new "Consolidated Data Information System" within VA, published in January 2001. This system of records was essential to release any identifiable veteran data to CMS for any data linkages for program administrative purposes;
- 6) Established a separate and parallel research Data Use Agreement "Access, Use and Cost of Medicare and VA Services by Veterans", with CMS and secondary Data Use

- Agreement with MSG's Medicare Data Analysis Center to ensure that VIREC would be able to acquire and analyze Medicare data, ensuring a timely report to the USH;
- 7) Coordinated a CMS-approved data transfer protocol for CY1999 and CY 2000 Medicare claims data between the OPP and the MSG Medicare Data Analysis Center and VIREC;
 - 8) Participated in the development and negotiation of a Memorandum of Understanding (MOU) between VA and CMS to expedite access to data and ensure patient confidentiality, which was finalized in July 2002;
 - 9) Created a master cross-reference file of dually eligible veterans that can be linked with VA and Medicare healthcare use/claims databases;
 - 10) Created new SAS datasets from the six CY 1999 Medicare health services utilization and claims files and the one Medicare enrollment information file for 1999 (received by July 2002). These files include data for all VHA users, enrollees, and special veteran populations from the following Medicare files: Part A MedPAR (inpatient and skilled nursing, stay-level data), Outpatient SAF, Hospice SAF, and Home Health Agency SAF, and Part B Carrier (physician/supplier) SAF, Durable Medical Equipment SAF, and the Denominator (enrollment) file. These data sets can be used for approved purposes by VA researchers under the new MOU;
 - 11) Submitted a request to VA HSR&D Service in November 2002 for funding to support a five-year project, allowing VIREC to continue to acquire, merge and manage Medicare data for research use. This request has been conditionally approved;
 - 12) Conducted research analyses of CY 1999 linked Medicare and VA data, describing access to care characteristics, enrollment and healthcare use patterns for the overall veteran population and for specific disease cohorts. Analyses were conducted nationally and by VISN.

The remainder of this report focuses on the research analyses carried out by VIREC for this project.

Research Overview and Specific Aims

Research aims of the project included:

- 1) To describe and compare the VA-Medicare dually eligible population in terms of general access to care characteristics and healthcare use patterns.
- 2) To describe and compare access to care and healthcare use patterns for two disease specific populations: the most prevalent cancer populations (prostate, lung and colorectal cancer) and end stage renal disease.
- 3) To explore and describe regional variation in veterans' access to and use of VA and Medicare services, by making comparisons across the Veterans Integrated Service Networks (VISNs).

This exploration focused on individual level access to care characteristics and their impact on veterans' VA and Medicare healthcare use. Access to care characteristics shown in previous research to affect healthcare use among veterans were studied, including residence in an urban or rural area, gender, age, and whether or not the veteran was required to pay a co-payment. Since documentation about ethnicity of veterans has been shown to be unreliable in VA administrative data sources (Boehmer et al., 2002), we did not include any individual level race or ethnicity

factors in our investigations. Further, while it is recognized that other access to care factors at the organizational and regional level may also be important (Andersen, 1995), examination of these factors were beyond the scope and timeframe of this project.

A special note about CMS' "Medicare+Choice", or M+C, program is important since healthcare utilization data are not available for veterans enrolled in this program. M+C was created by Congress in the Balanced Budget Act (BBA) of 1997, and the first M+C plans began providing healthcare services to people served by Medicare in January 1999. Most health maintenance organization (HMO) contracts and private Fee-for-Service (PFFS) contracts with CMS operate under the M+C program. A M+C plan typically provides healthcare coverage that exceeds the coverage of the original Medicare Fee-for-Service (FFS). As of September 2002, nearly 5 million people covered by Medicare were enrolled in 155 M+C plans. About 63.5 percent of seniors and disabled people covered by Medicare live in counties served by at least one M+C plan. Our research includes a description of the veterans enrolled in both Medicare FFS and M+C programs, but healthcare use or claims data for the M+C are not tracked by CMS, and therefore could not be described or compared.

Research Methods

Sampling Frame Construction

We constructed our sampling frame, or finder file, using a definition based on a three-year period consistent with methodologies used in the Office of Policy and Planning (OPP) and based on a consensus of a Technical Advisory Board (See "List of Participants", page i, for list of members). We identified veterans who met at least one of the following criteria from CY 1997 through 1999: 1) used the VHA, 2) enrolled in the VHA, or 3) received compensation or pension benefits from the VA. The veterans in the last group were included in the sampling frame solely based on eligibility rather than actual use, while the other two groups were included based on their seeking at least one type of service from the VHA healthcare system between 1997 and 1999.

Data sources for the sampling frame included those from the OPP's Planning System Support Group (PSSG), the Chief Network Office's VISN Support Service Center (VSSC), and the Chief Financial Office's Allocation Resource Center (ARC). Details are provided in Table 1.

This sampling frame included a total of 6.4 million veterans. Since our analysis focused on healthcare activity in 1999, we further limited our sampling frame to those veterans who were alive as of January 1, 1999, approximately 6.1 million veterans.

The resulting veteran cohort was submitted to CMS for matching with the Medicare information. CMS created a cross-reference file, which included all Social Security Numbers (SSNs) in our sampling frame for which a Medicare HIC (Health Insurance Claim Account Number) was found. The cross-reference file was then used to create a vital status file, an enrollment file, and claims files. All data files were then returned to VIREC. We used conservative matching criteria (see Fleming et al., 1992) to identify 2.6 million veterans who matched with the Medicare 1999 enrollment files. Figure 1 is a flowchart showing the progression from the 6.4 million sampling

frame to the 2.6 million dually eligible veterans studied in the remainder of this report. Details of the matching process and yield are described in Appendix D.

Unique Aspects for Defining ESRD Sample

To determine which of the 6.1 million veterans had ESRD, we submitted our sampling frame to the United States Renal Data System (USRDS) to identify all dialysis patients known to CMS. The USRDS is a national data system that collects, analyzes, and distributes information about ESRD (USRDS, 2001a). At the initiation of dialysis, healthcare providers fill out a CMS Medical Evidence form (CMS Form 2728) for nearly all patients (including veterans receiving care in the VA) for submission to CMS. The Medical Evidence form is submitted to CMS even if patients are not yet enrolled in Medicare. Data from the Medical Evidence form, along with the Medicare claims data, are then obtained by USRDS (USRDS, 1999). To ensure that patients without a Medical Evidence form (which was common prior to 1995) are not excluded from the USRDS database, USRDS also identifies ESRD patients based on a history of Medicare claims for dialysis.

Analyses

Analyses are exclusively descriptive in this report and focus on results for enrollment and healthcare use patterns. The Enrollment Tables (Table 3) describe three cohorts: all veterans in our sampling frame (6.1 million), Medicare-enrolled veterans (2.6 million), and veterans enrolled only in Medicare Fee-for-Service (FFS) (2.1 million). This distinction is important because Medicare does not collect claims data on Medicare-covered utilization for beneficiaries in M+C plans. Thus, our analyses are limited to describing the access and use patterns of FFS enrollees only. Demographics and access to care characteristics are described for each of these cohorts.

After data linkage, we identified veterans' VA and Medicare inpatient and outpatient healthcare use received during CY 1999 and categorized these 2.1 million Medicare-enrolled FFS veterans based on their patterns of use. Mutually exclusive categories included: used only VA services, used only Medicare services, used both VA and Medicare services, or used neither VA nor Medicare services. The Healthcare Utilization Tables are Tables 4 through 8; Tables 5 through 8 focus on disease-specific cohorts. We indicated the percentage of individuals who used only VA healthcare, the percentage of individuals who used only Medicare-covered services, the percentage of individuals who used both types of healthcare services, and the percentage who used neither VA nor Medicare healthcare services. VA healthcare use includes inpatient, outpatient, and fee-basis care; use of VA pharmacy or long term care services was not included. Medicare health services use includes Part A inpatient, skilled nursing (MedPAR), or outpatient care, and Part B physician/supplier (Carrier) services. Use of durable medical equipment, hospice care, and home health were not included in these analyses. Data sources are listed in Table 2.

Research Results

Overall Medicare-Enrolled Study Population

As shown in Table 3, of the 6.1 million veterans in our sampling frame, 89.6% of veterans over age 65 years were enrolled in Medicare. We also found that Medicare covered 12.1% of veterans under 65. This distribution reflects the fact that the VA serves a much more disabled, medically needy population than observed in the United States population at large. Additionally, veterans who lived in rural areas were more likely to be dually eligible than those who lived in urban areas (47.8% of veterans in rural areas and 38.6% in urban areas were dually eligible). Similarly, because VA facilities are more likely to be located in urban areas, veterans who lived within 30 miles of an inpatient or outpatient VA facility were less likely to be enrolled in Medicare. Also noteworthy is that females were less likely to be dually eligible than males (16.2% of females and 45.2% of males were dually eligible). Individuals with an assigned priority level were more likely to be enrolled in Medicare than those whose priority level was missing (47.8% vs. 26.2%).

VISNs 1, 3, 4, and 14 had the highest percentage of veterans dually eligible for Medicare and the VA, with almost 50% dually eligible, while VISNs 5, 17, 20, and 22 had the lowest percentage (about 35%) of veterans dually eligible. (See Appendix F for VISN names.)

Our analysis focused on the 2.1 million veterans who were enrolled in Medicare and did not enroll in a M+C plan in 1999 (83.7% of all Medicare-enrolled veterans). There were differences in age and location between those who enrolled in a M+C plan and those who remained in FFS. Only 5.3% of veterans under age 50 were enrolled in a M+C plan, but the percentage increased with age: 9.6% of veterans 50 to 64 years old and 17.9% of veterans age 65 and over were enrolled in a M+C plan. This could be because younger veterans could have more serious disabilities and be less likely to give up the flexibility of traditional Medicare FFS. Another possible explanation is that M+C plans sometimes offer benefits not included in Medicare FFS, such as prescription drug coverage, which may attract older veterans. It is also evident that a greater percentage of veterans who lived in urban areas enrolled in a M+C plan (22.6% in urban areas vs. 8.9% in rural areas). Similarly, because VA facilities are more likely to be located in urban areas, veterans who lived within 30 miles of inpatient or outpatient VA facilities were more likely to join a M+C plan. There was little difference in the gender distribution or priority level of veterans who chose to enroll in a M+C plan versus those who stayed in FFS.

It is important to note that M+C plans are not available in all areas of the country, nor are they available in many rural areas. This can be seen when looking at the geographic distribution of veterans choosing to enroll in a M+C plan. Of those veterans dually eligible, Midwestern VISNs (13, 14, and 15) and VISN 2 had the lowest percentage (less than 5%) enrolled at least one month in a M+C plan (See Figure 2). M+C plan enrollment was highest in VISNs 4, 8, 21, and 22. VISN 22 had the highest percentage, with 42.6% of Medicare-enrolled veterans enrolled at least one month in a M+C plan. (See Appendix F for VISN names.)

Healthcare Use Among Medicare-Enrolled FFS Veterans

As seen in Table 4, of the 2,186,004 Medicare enrolled FFS veterans, 42.6% used both VA and Medicare services, while 21.9% used only VA services, and 30.3% used only Medicare services. Only 5.0% used neither VA nor Medicare services in 1999.

Because Medicare coverage is almost universal for those age 65 and older, but restricted to a disabled population for those under age 65, we might expect healthcare use to differ for these two age groups. Among veterans 65 and older, 43.9% used both services, while 17.7% used VA only, and 33.9% used Medicare only. However, among those under 65, 37.0% used both types of services, while 40.6% used only VA services, and 14.5% used only Medicare services. Thus, among those covered by Medicare due to disability, reliance on only the VA for care was much higher (40.6%) than among the aged (17.7%). Those under 65 also had a higher percentage of non-use of either services (7.9% versus 4.4% for veterans 65 and older). Future analysis of the service-connected disabled veterans may help shed further light on the specific care needs of this population.

Examining utilization by gender, we found that females relied somewhat more on Medicare than males, with 38.9% of females using only Medicare, compared to 30.0% of males, and 17.4% of females using only the VA, compared to 22.1% of males.

As expected, these data show veterans who lived within 30 miles of VA facilities relied more on only VA services and somewhat less on only Medicare services. Conversely, those more than 30 miles from an inpatient VA facility were less likely to use only VA services than those who lived within 30 miles. For those within 30 miles of an inpatient VA facility, 26.0% (versus 17.4%) used only VA services, while 29.8% (versus 31.1%) used only Medicare services, and 38.2% (versus 47.2%) used both types of services.

Finally, looking at utilization by priority status, we found that veterans with a high priority level (Priority Levels 1-6) were much more likely to rely only on the VA rather than Medicare services, an expected result given their greater access to VA services in terms of lower or no co-payments and scheduling priority.

Healthcare use among the 2,186,004 Medicare-enrolled FFS veterans varied across VISNs (See Figures 3, 4, and 5). Exclusive VA use was highest in the West (VISNs 18, 20, 21, and 22) and lowest in VISNs 3, 4, 11, and 14, and ranged from 15.6% to 28.7%. Medicare only usage was highest in the Northeast (VISNs 1, 3, 6, and 10) and lowest in the south-central VISNs (15, 16, 17, and 18), and ranged from 23.1% to 37.8%. Dual usage among veterans was highest in the Midwest (VISNs 9, 13, 14, and 15) and lowest in the West (VISNs 20, 21, and 22) and also in VISN 5, and ranged from 33.3% to 52.5%. It is interesting to note that the VISNs with the lowest percentage of veterans enrolled in a M+C plan (13, 14, and 15) had the highest percentage of dual users. Also, the VISNS with the highest M+C plan enrollment (20, 21 and 22) had a high percentage of veterans using the VA exclusively and a low percentage of dual users. (See Appendix F for VISN names.)

Specific Chronic Disease Populations: Cancer

We explored enrollment and healthcare use patterns for the three largest cancer populations among veterans: prostate cancer, lung cancer, and colorectal cancer. Patients were identified based on disease-specific International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) codes found as a diagnosis in any of the VA healthcare or Medicare claims datasets in 1999.

Prostate Cancer

Enrollment

Among the veterans enrolled in Medicare FFS, 7.4%, or 161,337 veterans, had a prostate cancer diagnosis (ICD-9-CM = 185) in 1999. Compared to the overall population of veterans enrolled in Medicare FFS, veterans with prostate cancer were older (95.5% were age 65 or older versus 81.6% for all FFS veterans), were more likely to have lived in an urban area (52.5% lived in an urban ZIP code versus 49.4% for all FFS veterans), and less likely to have a high priority level (58.2% were high priority versus 66.4% for all FFS veterans).

Healthcare Use

As seen in Table 5, healthcare use patterns for veterans with a prostate cancer diagnosis differed from that of the overall population of veterans enrolled in Medicare FFS: 5.3% (versus 21.9% for all FFS veterans) used only VA services, 39.3% (versus 30.3% for all FFS veterans) used only Medicare services, and 55.3% (versus 42.63% for all FFS veterans) used both Medicare and VA services. As in the overall veteran population, exclusive VA use among veterans with prostate cancer was highest in the West (VISNs 20, 21, and 22), but was also high in VISN 5, and ranged from 3.2% to 9.7%. Also similar to the overall veteran population, Medicare only usage was highest in the Northeast (VISNs 1, 3, 6, and 10), and ranged from 31.8% to 44.9%. Dual usage among veterans with prostate cancer was highest in the Midwest (VISNs 13, 14, 15), like the overall population, but was also high in VISN 18, and ranged from 49.4% to 64.4%. (See Appendix F for VISN names.)

Lung Cancer

Enrollment

Among the veterans enrolled in Medicare FFS, 1.6%, or 35,768 veterans, had a lung cancer diagnosis (ICD-9-CM = 162, 162.3 –162.9) in 1999. Compared to the overall population of veterans enrolled in Medicare FFS, veterans with lung cancer were older (90.1% were age 65 or older versus 81.6% for all FFS veterans) and more likely have a high priority level (71.0% were high priority versus 66.4% in the for all FFS veterans).

Healthcare Use

As seen in Table 6, healthcare use patterns for veterans with a lung cancer diagnosis differed from that of the overall population of veterans enrolled in Medicare FFS: 12.3% (versus 21.9% for all FFS veterans) used only VA services, 29.3% (versus 30.3% for all FFS veterans) used only Medicare services, and 58.2% (versus 42.6% for all FFS veterans) used both Medicare and VA services. As in the overall veteran population, exclusive VA use among veterans with lung

cancer was highest in the West (VISNs 17, 19, and 20), but was also high in VISN 5, and ranged from 7.5% to 18.6%. Also similar to the overall veteran population, Medicare only usage was highest in the Northeast (VISNs 1, 3, and 4), but also high in VISN 22, and ranged from 22.5% to 39.4%. Dual usage among veterans with lung cancer was highest in the Midwest (VISNs 13, 14, 15), like the overall population, but was also high in VISN 18, and ranged from 52.1% to 66.6%. (See Appendix F for VISN names.)

Colorectal Cancer

Enrollment

Among the veterans enrolled in Medicare FFS, 1.6%, or 35,371 veterans, had a colorectal cancer diagnosis (ICD-9-CM = 153 –154.8) in 1999. Compared to the overall population of veterans enrolled in Medicare FFS, veterans with colorectal cancer were older (93.0% were age 65 or older compared to 81.6% for all FFS veterans), more likely to have lived in an urban area (52.4% compared with 49.4% for all FFS veterans), and less likely to have a high priority level (61.4% compared with 66.4% for all FFS veterans).

Healthcare Use

As seen in Table 7, healthcare use patterns for veterans with a colorectal cancer diagnosis differed from that of the overall population of veterans enrolled in Medicare FFS: 8.6% (versus 21.9% for all FFS veterans) used only VA services, 36.1% (versus 30.3% for all FFS veterans) used only Medicare services, and 55.1% (versus 42.6% for all FFS veterans) used both Medicare and VA services. As in the overall veteran population, exclusive VA use among veterans with colorectal cancer was highest in the West (VISNs 18, 19, and 20), but was also high in VISN 5, and ranged from 5.0% to 14.8%. Also similar to the overall veteran population, Medicare only usage was highest in the Northeast (VISNs 1, 3, 6, and 10), and ranged from 28.2% to 44.8%. Dual usage among veterans with colorectal cancer was highest in the Midwest (VISNs 9, 13, 14, 15), like the overall population, and ranged from 49.7% to 63.1%. (See Appendix F for VISN names.)

Specific Chronic Disease Population: End Stage Renal Disease

Veterans with end stage renal disease (ESRD) require chronic dialysis or kidney transplantation to replace lost kidney function. ESRD patients require intensive and expensive use of healthcare resources. With hemodialysis often requiring three sessions per week, geographic and transportation issues are not trivial. Moreover, dialysis care is just one dimension of care. ESRD care also includes maintaining adequate vascular access, treating anemia, and managing the clinical care needs of chronic renal failure as well as the underlying disease that caused the renal failure. VA hospitals and VISNs must consider the continuum of care for ESRD patients. Insurance options for ESRD patients are particularly complex and make care planning challenging at the patient, facility, and VISN level. After a waiting period, all ESRD patients, including veterans, are eligible to receive Medicare Part A, which covers inpatient services, regardless of their age, if they have renal failure and have worked the required amount of time to be eligible for Social Security benefits. ESRD patients can also enroll in Medicare Part B, which covers outpatient services, when they enroll in Part A. Some parenteral medications vital to ESRD patients are also included in Medicare coverage. Depending upon whether an ESRD

beneficiary might also have any private health insurance individually or through a spouses' coverage, the extent of coverage from Medicare can vary over time. The complex relationship of coverage benefits and financial incentives for ESRD patients make it vital to examine healthcare use across systems of care.

Enrollment

Among the patients enrolled in Medicare FFS, 1.1%, or 24,466 veterans, had end stage renal disease in 1999. Because patients with ESRD are eligible for Medicare coverage three months after initiating dialysis, regardless of age, the proportion of veterans with ESRD under age 65 enrolled in Medicare is larger than among the overall population of Medicare-enrolled veterans in our sampling frame. Compared to the overall population, veterans with ESRD were younger (only 62.8% were age 65 or older compared to 81.6% in the overall population) and were more likely to have a high priority level (76% had a high priority level versus 66% in the overall population). ESRD patients were also more likely to have lived in an urban area (56.9% compared to 49.4% in the overall population) and have lived within 30 miles of an inpatient VA facility (55.2% vs. 51.0%).

There was considerable diversity in the distribution of veterans with ESRD among the VISNs ranging from 480 (VISN 14) to 2,204 (VISN 16) with the largest numbers of patients in the eastern portion of the US. There is also diversity in terms of distance to VA facilities. While only 5.8% of ESRD patients are more than 30 miles from a VA inpatient facility in VISN 3 (with 1,513 ESRD patients), 69% of ESRD patients in VISN 14 (with 480) are more than 30 miles from a VA inpatient facility. In VISN 16, with the largest number of ESRD patients (2,204), 37% of ESRD patients are more than 30 miles from a VA inpatient facility.

Healthcare Use

As seen in Table 8, healthcare use patterns for veterans with ESRD differed from that of the overall population: 9.4% (versus 21% in the overall population) used only VA services, 30.5% (versus 30% in the overall population) used only Medicare services, and 60% (versus 42.6% in the overall population) used both Medicare and VA services.

An examination of distance to VA facilities further highlights the association between distance to VA inpatient facilities and exclusive VA use. While 72% of veterans who used VA services only were 30 miles or less from a VA inpatient facility, 55% of veterans who used Medicare services only and 53% of veterans who used both were 30 miles or less from a VA inpatient facility. However, similar proportions of veterans lived 30 miles or less from a VA outpatient facility (85% for VA only, 84% for Medicare only, and 82% for both). The greater association between exclusive VA use and distance to VA inpatient facilities (rather than VA outpatient facilities) may arise because dialysis in the VA, which veterans using hemodialysis typically receive three times per week, is usually provided at VA inpatient facilities.

Although veterans with ESRD are enrolled in Medicare regardless of age, there is still a greater reliance on VA services among younger veterans. The majority (55%) of Medicare-enrolled veterans with ESRD who used only VA services were under age 65. In contrast, 30% of veterans who used Medicare services only and 38% of veterans who used both VA and Medicare services were under age 65.

Examining utilization by gender, we find that similar proportions of females (8.6%) and males (9.4%) used VA services only. However, among the 564 females with ESRD in our cohort, there was a greater reliance on Medicare services than among male veterans. While 48.2% of females relied exclusively on Medicare services and 42% used both, only 30% of male veterans relied exclusively on Medicare services and 60.4% used both. The pattern among ESRD patients parallels the pattern among all 2.18 million Medicare-enrolled FFS veterans in our sampling frame. Among all Medicare-enrolled veterans, 38.9% of females relied exclusively on Medicare services as compared with 30% of males.

Exclusive use of VA services was also more prevalent among veterans with ESRD who were high priority than among veterans who were low priority. Among VA only users, 95% were high priority, and among dual Medicare and VA users, 87.9% were high priority. In contrast, only 46% of exclusive Medicare users were high priority.

As in the overall veteran population, exclusive VA use among veterans with ESRD was highest in the West (VISNs 19, 21, and 22), but was also high in VISN 9, and ranged from 6.0% to 17.1%. Also similar to the overall veteran population, Medicare only usage was highest in the Northeast (VISNs 3, 4, 5, and 10), and ranged from 21.5% to 40.1%. Dual usage among veterans with ESRD was highest in VISN 18,, and also in VISNs 7, 9, and 13, and ranged from 51.9% to 65.3%. (See Appendix F for VISN names.)

Discussion and Policy Implications

Overall Population: Enrollment and Healthcare Use

The enrollment and utilization tables point out the importance of including both Medicare and VA utilization when describing veterans' access to healthcare. Overall, 42.2% of veterans in our sampling frame had Medicare coverage. Of veterans age 65 and older, 89.6% had Medicare coverage and 12.1% of veterans under age 65 had Medicare coverage. Of the veterans covered by Medicare, 73% used Medicare-covered services (Part A inpatient, skilled nursing, or outpatient care, or Part B physician/supplier). Of these Medicare users, 58.4% used both Medicare and VA (inpatient, outpatient, or fee-basis) services. Conversely, of the 64.6% of Medicare-enrolled veterans in the sampling frame who used VA inpatient or outpatient services, almost two-thirds of them also used some Medicare services.

These results indicate that most veterans with ties to the VA system have complex patterns of healthcare use and are consistent with informal reports made by VHA OPP (Stefos, Personal Communication, 2003; Management Science Group, Personal Communication, 2003). This suggests the importance of more research efforts into why these patterns are occurring and whether this behavior is reasonable or represents unnecessary healthcare utilization. Clearly, veterans value dual use and any policies that discourage its use may adversely affect access to care. More careful analyses of diagnostic and demographic subgroups may help shed light on these issues.

Future research can utilize the current data by focusing on subgroups such as pharmacy-only and service-connected disabled populations by examining the extent to which dual use veterans use similar or different services in VA and in Medicare. Once we have a firmer understanding of patterns of utilization, survey research can provide more detailed information about why veterans pursue these patterns of care and how alternative models of care might affect their utilization and perceived ability to access services.

Another key finding is that distance to VA facilities is related to healthcare use. Regardless of distance to a VA facility, approximately 65% of veterans used VA services. However, those who lived further from VA facilities were more likely to supplement their VA healthcare with Medicare services. Further research can explore and examine the types and amount of services used and how the availability of VA and Medicare services affect veterans' choices.

Disease Specific Implications

As discussed previously, our results point to the need to examine both Medicare and VA data to understand the full spectrum of healthcare used by veterans, and many of the same issues apply to the cancer and ESRD cohorts. Of particular relevance for the treatment of these diseases is the fact that a high percentage of patients are receiving care in multiple healthcare systems. Given the extensive healthcare needs of veterans with cancer or ESRD, it is important to understand healthcare use across multiple settings to ensure that veterans with cancer or ESRD are receiving comprehensive care without duplicating the healthcare services they receive. Further research focusing on the types of healthcare dual users are receiving inside and outside the VA may elucidate efforts to increase coordination across settings of care.

Cancer

Medicare-enrolled veterans with a cancer diagnosis were more likely to have used both VA and Medicare services and less likely to have used only VA services than the overall study population of Medicare-enrolled veterans. This finding may in part reflect cancer patients' greater healthcare use in general and greater use of university-based cancer centers in particular. Depending upon whether the primary mode of treatment is surgical, requiring inpatient care, or medical, requiring predominantly outpatient care, healthcare use patterns may vary. Further, stage of cancer may also be an important factor, but this information is not available in the VA or Medicare healthcare data. Linkages with local or national VA tumor registry data and/or National Cancer Institute (NCI) Surveillance Epidemiology End Results (SEER) data that provide staging information, would be an important area for further research in cancer populations.

End Stage Renal Disease

Medicare-enrolled veterans with ESRD were more likely to have used both VA and Medicare-covered services and less likely to have used only VA services than all Medicare-enrolled veterans. This finding may reflect, in part, non-VA dialysis use. Veterans with ESRD require extensive use of dialysis services (often three dialysis sessions per week) to replace lost kidney function, which may have two implications for non-VA dialysis use. First, because dialysis is a

limited resource in the VA, some veterans who initiate dialysis in the VA may be encouraged to move to Medicare-covered dialysis once they enroll in Medicare. Second, because dialysis in the VA is usually provided in an inpatient setting, which may be more than 30 miles away from home for a substantial portion of veterans, it may be more convenient geographically for a veteran to receive chronic dialysis in a Medicare-covered non-VA facility.

Limitations

There are some limitations to the research presented in this report. First, VIREC used conservative match criteria for VA-Medicare beneficiary data linkage (Fleming et al., 1992). While our approach is consistent with current methods and yielded a near 95% match rate, it should be noted that a less conservative approach may yield an even higher match rate, resulting in a larger number of dually eligible veterans in the study population for analysis of trends. Researchers may choose to examine the sensitivity and specificity of new data linkage criteria.

Secondly, because Medicare maintains claims data only for healthcare use provided under FFS, no information on healthcare use is available for care provided in M+C plans. Thus our analysis is restricted only to those who were not enrolled in a M+C plan during the year. The extent to which healthcare use for FFS and M+C plan enrollees differ cannot be ascertained from this report.

Finally, the scope of our analysis was limited to descriptive analysis of inpatient and outpatient healthcare use. This analysis does not simultaneously control for the impact of multiple variables, multiple comparisons or other risk adjustment. While additional research is continuing at VIREC, it is hoped that by making these data available for research and program administration purposes, there will be extensive evaluation of these trends. Also, the scope of healthcare service use examined in this report is limited to VA and Medicare inpatient and outpatient utilization. Inclusion of other VA or Medicare-covered services, including VA pharmacy, long term care services, and durable medical equipment would have likely increased the proportion of patients receiving both VA and Medicare services.

Conclusions

The use of both VA and Medicare-covered services may allow veterans to optimize their healthcare delivery by utilizing the unique benefits offered by both systems. However, such dual use may also lead to discontinuity and duplication of services. VA and CMS policy initiatives aimed at affecting national access to care issues need to consider the differential impacts of geographic regions and VISNs to ensure the best healthcare for our nation's veterans. Access to healthcare and patterns of use for the overall Medicare-enrolled veteran population differed from the patterns for the disease-specific populations. In particular, Medicare-enrolled veterans with cancer or ESRD were more likely to have used both VA and Medicare-covered services and less likely to have used only VA or only Medicare services than all Medicare-enrolled veterans. Any plans for restructuring or coordinating healthcare benefits for veterans should consider the unique aspects of disease subgroups. Further exploration might examine whether veterans' propensity to use VA or Medicare services is determined by quality of care or extent of treatment

coverage. Depending on whether the primary mode of treatment requires inpatient care, outpatient care, or medications, the mix of VA and Medicare healthcare use patterns may vary. Additional analysis examining the simultaneous impacts of multiple access to care and disease factors on healthcare use patterns, including VA pharmacy use, could also prove to be important for policy decisions. Especially in light of new plans underway to develop a VA “Medicare+Choice” option for the Priority 8 veterans enrolled in Medicare, this research and future analyses can help inform health policy discussions between CMS, the VA, and Congress in considering new and improved healthcare delivery and benefit plans for patients dually eligible for VA and Medicare services.

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Table 1
Sampling Frame / Finder File Cohort Data Sources

Data Source	Description	Unique SSNs Found
VSSC/PSSG, Enrollment files December 1999	All individuals enrolled in the VHA as of December 31, 1999	4,423,743
VSSC, Compensation and Pension Non-User files FY 97-99	All veterans who obtained compensation or pension and had no VA healthcare use	903,231
VSSC, Unique Users files FY97-00	All veterans who used VHA healthcare	1,009,880
ARC, Pharmacy Only User files FY97-99	All veterans who used only pharmacy services	82,749
Cumulative Yield		6,411,210
BIRLS NDI	Veterans deceased prior to January 1, 1999	-231,937
VIReC Veterans Cohort (Sampling Frame)		6,179,273

Table 2
Healthcare Use Data Sources

Data	File Name	Description
VA Inpatient	Inpatient Main (PM) File FY 1999-2000	Contains stay records for acute inpatient care in a VA Medical Center
VA Fee Basis Inpatient	Fee Basis Inpatient (INPT) File FY 1999-2000	Contains data for acute inpatient hospital care and community nursing home care provided by contracted providers
VA Outpatient	Outpatient Visit (SF) File FY 1999-2000	Contains data for outpatient services rendered at a VA Medical Center, VA Outpatient Clinic, or VA Community Based Outpatient Clinic
VA Fee Basis Outpatient	Fee Basis Outpatient (MED) File FY 1999-2000	Contains data for outpatient services and home health care provided by contracted providers
Medicare Part A Inpatient and Skilled Nursing Facility	MedPAR (Medicare Provider and Analysis Review) File CY 1999	Contains stay records for inpatient hospital care and skilled nursing facility care
Medicare Part A Outpatient	Outpatient SAF (Standard Analytical File) CY 1999	Contains claims data submitted by institutional outpatient providers, including hospital outpatient departments, rural health clinics, renal dialysis facilities, outpatient rehabilitation facilities, comprehensive outpatient rehabilitation facilities, community mental health centers, and ambulatory surgical centers
Medicare Part B Physician/ Supplier	Carrier SAF (Standard Analytical File) CY 1999	Contains claims data submitted by non-institutional providers, including physicians, physician assistants, clinical social workers, nurse practitioners, independent clinical laboratories, ambulance providers, and stand-alone ambulatory surgical centers

Table 3 – Medicare Enrollment Among Veterans

NATIONAL SUMMARY

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	6,179,273	100.0%	2,611,146	42.2%	100.0%	2,186,004	35.3%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	2,455,817	39.7%	1,174,724	47.8%	44.9%	1,070,164	43.5%	48.9%
Urban	3,613,557	58.4%	1,397,406	38.6%	53.5%	1,081,108	29.9%	49.4%
Zip Invalid/Missing	109,899	1.7%	39,016	35.5%	1.4%	34,732	31.6%	1.5%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	5,330,150	86.2%	2,198,930	41.2%	84.2%	1,795,713	33.6%	82.1%
> 30 miles	739,224	11.9%	373,200	50.4%	14.2%	355,559	48.0%	16.2%
Zip Invalid/Missing	109,899	1.7%	39,016	35.5%	1.4%	34,732	31.6%	1.5%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	3,682,463	59.5%	1,425,889	38.7%	54.6%	1,116,142	30.3%	51.0%
> 30 miles	2,386,911	38.6%	1,146,241	48.0%	43.8%	1,035,130	43.3%	47.3%
Zip Invalid/Missing	109,899	1.7%	39,016	35.5%	1.4%	34,732	31.6%	1.5%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	1,896,025	30.6%	129,558	6.8%	4.9%	122,656	6.4%	5.6%
50-64 years	1,731,857	28.0%	308,793	17.8%	11.8%	279,300	16.1%	12.7%
≥ 65 years	2,423,846	39.2%	2,172,501	89.6%	83.2%	1,783,810	73.5%	81.6%
Invalid/Missing Age	127,545	2.0%	294	0.2%	0.0%	238	0.1%	0.0%
GENDER ¹⁶								
Female	618,621	10.0%	100,329	16.2%	3.8%	81,547	13.1%	3.7%
Male	5,552,228	89.8%	2,510,817	45.2%	96.1%	2,104,457	37.9%	96.2%
Missing Gender	8,424	0.1%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	3,606,803	58.3%	1,709,402	47.3%	65.4%	1,452,478	40.2%	66.4%
Low Priority	976,742	15.8%	483,430	49.4%	18.5%	392,457	40.1%	17.9%
Priority Level Missing	1,595,728	25.8%	418,314	26.2%	16.0%	341,069	21.3%	15.6%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 1 - VA New England Healthcare System

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	297,509	100.0%	144,040	48.4%	100.0%	115,698	38.8%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	105,453	35.4%	51,299	48.6%	35.6%	45,198	42.8%	39.0%
Urban	189,979	63.8%	91,742	48.2%	63.6%	69,605	36.6%	60.1%
Zip Invalid/Missing	2,077	0.6%	999	48.0%	0.6%	895	43.0%	0.7%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	286,766	96.3%	138,519	48.3%	96.1%	110,344	38.4%	95.3%
> 30 miles	8,666	2.9%	4,522	52.1%	3.1%	4,459	51.4%	3.8%
Zip Invalid/Missing	2,077	0.6%	999	48.0%	0.6%	895	43.0%	0.7%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	219,619	73.8%	103,793	47.2%	72.0%	79,759	36.3%	68.9%
> 30 miles	75,813	25.4%	39,248	51.7%	27.2%	35,044	46.2%	30.2%
Zip Invalid/Missing	2,077	0.6%	999	48.0%	0.6%	895	43.0%	0.7%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	74,926	25.1%	6,723	8.9%	4.6%	6,496	8.6%	5.6%
50-64 years	78,189	26.2%	15,097	19.3%	10.4%	13,642	17.4%	11.7%
≥ 65 years	135,289	45.4%	122,206	90.3%	84.8%	95,547	70.6%	82.5%
Invalid/Missing Age	9,105	3.0%	14	0.1%	0.0%	13	0.1%	0.0%
GENDER ¹⁶								
Female	26,482	8.9%	5,420	20.4%	3.7%	4,394	16.5%	3.7%
Male	270,899	91.0%	138,620	51.1%	96.2%	111,304	41.0%	96.2%
Missing Gender	128	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	164,508	55.2%	90,286	54.8%	62.6%	73,852	44.8%	63.8%
Low Priority	48,150	16.1%	26,987	56.0%	18.7%	20,093	41.7%	17.3%
Priority Level Missing	84,851	28.5%	26,767	31.5%	18.5%	21,753	25.6%	18.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 2 - VA Healthcare Network Upstate New York

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	179,208	100.0%	85,526	47.7%	100.0%	73,773	41.1%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	93,914	52.4%	45,991	48.9%	53.7%	40,986	43.6%	55.5%
Urban	83,864	46.7%	38,790	46.2%	45.3%	32,106	38.2%	43.5%
Zip Invalid/Missing	1,430	0.7%	745	52.0%	0.8%	681	47.6%	0.9%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	174,834	97.5%	83,253	47.6%	97.3%	71,630	40.9%	97.0%
> 30 miles	2,944	1.6%	1,528	51.9%	1.7%	1,462	49.6%	1.9%
Zip Invalid/Missing	1,430	0.7%	745	52.0%	0.8%	681	47.6%	0.9%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	117,570	65.6%	54,715	46.5%	63.9%	45,257	38.4%	61.3%
> 30 miles	60,208	33.5%	30,066	49.9%	35.1%	27,835	46.2%	37.7%
Zip Invalid/Missing	1,430	0.7%	745	52.0%	0.8%	681	47.6%	0.9%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	49,077	27.3%	3,464	7.0%	4.0%	3,390	6.9%	4.5%
50-64 years	46,242	25.8%	8,868	19.1%	10.3%	8,284	17.9%	11.2%
≥ 65 years	79,983	44.6%	73,185	91.5%	85.5%	62,092	77.6%	84.1%
Invalid/Missing Age	3,906	2.1%	9	0.2%	0.0%	7	0.1%	0.0%
GENDER ¹⁶								
Female	17,271	9.6%	3,075	17.8%	3.5%	2,659	15.3%	3.6%
Male	161,783	90.2%	82,451	50.9%	96.4%	71,114	43.9%	96.3%
Missing Gender	154	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	98,627	55.0%	54,055	54.8%	63.2%	47,779	48.4%	64.7%
Low Priority	41,809	23.3%	21,839	52.2%	25.5%	17,588	42.0%	23.8%
Priority Level Missing	38,772	21.6%	9,632	24.8%	11.2%	8,406	21.6%	11.3%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 3 - VA NY/NJ Veterans Healthcare Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	330,277	100.0%	161,119	48.7%	100.0%	126,483	38.2%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	27,266	8.2%	13,706	50.2%	8.5%	11,316	41.5%	8.9%
Urban	301,526	91.2%	146,827	48.6%	91.1%	114,700	38.0%	90.6%
Zip Invalid/Missing	1,485	0.4%	586	39.4%	0.3%	467	31.4%	0.3%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	328,792	99.5%	160,533	48.8%	99.6%	126,016	38.3%	99.6%
Zip Invalid/Missing	1,485	0.4%	586	39.4%	0.3%	467	31.4%	0.3%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	308,567	93.4%	148,336	48.0%	92.0%	116,335	37.7%	91.9%
> 30 miles	20,225	6.1%	12,197	60.3%	7.5%	9,681	47.8%	7.6%
Zip Invalid/Missing	1,485	0.4%	586	39.4%	0.3%	467	31.4%	0.3%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	79,410	24.0%	4,930	6.2%	3.0%	4,589	5.7%	3.6%
50-64 years	84,748	25.6%	13,257	15.6%	8.2%	11,530	13.6%	9.1%
≥ 65 years	158,548	48.0%	142,917	90.1%	88.7%	110,349	69.5%	87.2%
Invalid/Missing Age	7,571	2.2%	15	0.1%	0.0%	15	0.1%	0.0%
GENDER ¹⁶								
Female	24,678	7.4%	3,733	15.1%	2.3%	3,058	12.3%	2.4%
Male	305,463	92.4%	157,386	51.5%	97.6%	123,425	40.4%	97.5%
Missing Gender	136	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	157,247	47.6%	84,944	54.0%	52.7%	66,417	42.2%	52.5%
Low Priority	98,181	29.7%	55,724	56.7%	34.5%	42,959	43.7%	33.9%
Priority Level Missing	74,849	22.6%	20,451	27.3%	12.6%	17,107	22.8%	13.5%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 4 - VA Stars & Stripes Healthcare Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	360,180	100.0%	175,829	48.8%	100.0%	131,202	36.4%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	159,087	44.1%	80,652	50.6%	45.8%	64,288	40.4%	48.9%
Urban	198,867	55.2%	93,959	47.2%	53.4%	65,886	33.1%	50.2%
Zip Invalid/Missing	2,226	0.6%	1,218	54.7%	0.6%	1,028	46.1%	0.7%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	351,348	97.5%	171,402	48.7%	97.4%	127,386	36.2%	97.0%
> 30 miles	6,606	1.8%	3,209	48.5%	1.8%	2,788	42.2%	2.1%
Zip Invalid/Missing	2,226	0.6%	1,218	54.7%	0.6%	1,028	46.1%	0.7%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	250,343	69.5%	119,554	47.7%	67.9%	85,169	34.0%	64.9%
> 30 miles	107,611	29.8%	55,057	51.1%	31.3%	45,005	41.8%	34.3%
Zip Invalid/Missing	2,226	0.6%	1,218	54.7%	0.6%	1,028	46.1%	0.7%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	89,775	24.9%	6,119	6.8%	3.4%	5,648	6.2%	4.3%
50-64 years	94,850	26.3%	17,066	17.9%	9.7%	14,379	15.1%	10.9%
≥ 65 years	166,717	46.2%	152,629	91.5%	86.8%	111,165	66.6%	84.7%
Invalid/Missing Age	8,838	2.4%	15	0.1%	0.0%	10	0.1%	0.0%
GENDER ¹⁶								
Female	25,930	7.1%	4,350	16.7%	2.4%	3,367	12.9%	2.5%
Male	334,043	92.7%	171,479	51.3%	97.5%	127,835	38.2%	97.4%
Missing Gender	207	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	204,634	56.8%	109,288	53.4%	62.1%	83,006	40.5%	63.2%
Low Priority	76,610	21.2%	42,320	55.2%	24.0%	29,754	38.8%	22.6%
Priority Level Missing	78,936	21.9%	24,221	30.6%	13.7%	18,442	23.3%	14.0%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 5 - VA Capital Health Care Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	159,506	100.0%	57,167	35.8%	100.0%	50,762	31.8%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	47,871	30.0%	19,916	41.6%	34.8%	18,312	38.2%	36.0%
Urban	110,265	69.1%	36,672	33.2%	64.1%	31,923	28.9%	62.8%
Zip Invalid/Missing	1,370	0.8%	579	42.2%	1.0%	527	38.4%	1.0%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	156,173	97.9%	55,697	35.6%	97.4%	49,442	31.6%	97.3%
> 30 miles	1,963	1.2%	891	45.3%	1.5%	793	40.3%	1.5%
Zip Invalid/Missing	1,370	0.8%	579	42.2%	1.0%	527	38.4%	1.0%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	136,673	85.6%	45,709	33.4%	79.9%	40,195	29.4%	79.1%
> 30 miles	21,463	13.4%	10,879	50.6%	19.0%	10,040	46.7%	19.7%
Zip Invalid/Missing	1,370	0.8%	579	42.2%	1.0%	527	38.4%	1.0%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	54,105	33.9%	2,616	4.8%	4.5%	2,521	4.6%	4.9%
50-64 years	46,061	28.8%	5,679	12.3%	9.9%	5,356	11.6%	10.5%
≥ 65 years	56,510	35.4%	48,864	86.4%	85.4%	42,877	75.8%	84.4%
Invalid/Missing Age	2,830	1.7%	8	0.2%	0.0%	8	0.2%	0.0%
GENDER ¹⁶								
Female	16,062	10.0%	1,807	11.2%	3.1%	1,633	10.1%	3.2%
Male	143,319	89.8%	55,360	38.6%	96.8%	49,129	34.2%	96.7%
Missing Gender	125	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	93,754	58.7%	38,233	40.7%	66.8%	33,870	36.1%	66.7%
Low Priority	19,854	12.4%	8,081	40.7%	14.1%	7,035	35.4%	13.8%
Priority Level Missing	45,898	28.7%	10,853	23.6%	18.9%	9,857	21.4%	19.4%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 6 - The Mid-Atlantic Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	313,380	100.0%	121,577	38.7%	100.0%	116,346	37.1%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	159,278	50.8%	73,074	45.8%	60.1%	70,504	44.2%	60.5%
Urban	150,255	47.9%	46,508	30.9%	38.2%	43,888	29.2%	37.7%
Zip Invalid/Missing	3,847	1.2%	1,995	51.8%	1.6%	1,954	50.7%	1.6%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	247,640	79.0%	90,254	36.4%	74.2%	85,455	34.5%	73.4%
> 30 miles	61,893	19.7%	29,328	47.3%	24.1%	28,937	46.7%	24.8%
Zip Invalid/Missing	3,847	1.2%	1,995	51.8%	1.6%	1,954	50.7%	1.6%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	178,880	57.0%	59,548	33.2%	48.9%	55,906	31.2%	48.0%
> 30 miles	130,653	41.6%	60,034	45.9%	49.3%	58,486	44.7%	50.2%
Zip Invalid/Missing	3,847	1.2%	1,995	51.8%	1.6%	1,954	50.7%	1.6%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	111,786	35.6%	7,233	6.4%	5.9%	7,166	6.4%	6.1%
50-64 years	89,075	28.4%	17,136	19.2%	14.0%	16,704	18.7%	14.3%
≥ 65 years	108,032	34.4%	97,197	89.9%	79.9%	92,466	85.5%	79.4%
Invalid/Missing Age	4,487	1.4%	11	0.2%	0.0%	10	0.2%	0.0%
GENDER ¹⁶								
Female	31,078	9.9%	4,107	13.2%	3.3%	3,933	12.6%	3.3%
Male	281,896	89.9%	117,470	41.6%	96.6%	112,413	39.8%	96.6%
Missing Gender	406	0.1%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	182,643	58.2%	81,539	44.6%	67.0%	78,479	42.9%	67.4%
Low Priority	47,035	15.0%	19,370	41.1%	15.9%	18,167	38.6%	15.6%
Priority Level Missing	83,702	26.7%	20,668	24.6%	16.9%	19,700	23.5%	16.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 7 - The Atlanta Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	354,215	100.0%	136,476	38.5%	100.0%	130,577	36.8%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	173,768	49.0%	76,081	43.7%	55.7%	74,093	42.6%	56.7%
Urban	175,736	49.6%	58,313	33.1%	42.7%	54,512	31.0%	41.7%
Zip Invalid/Missing	4,711	1.3%	2,082	44.1%	1.5%	1,972	41.8%	1.5%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	273,931	77.3%	98,499	35.9%	72.1%	93,169	34.0%	71.3%
> 30 miles	75,573	21.3%	35,895	47.4%	26.3%	35,436	46.8%	27.1%
Zip Invalid/Missing	4,711	1.3%	2,082	44.1%	1.5%	1,972	41.8%	1.5%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	166,824	47.0%	53,229	31.9%	39.0%	48,386	29.0%	37.0%
> 30 miles	182,680	51.5%	81,165	44.4%	59.4%	80,219	43.9%	61.4%
Zip Invalid/Missing	4,711	1.3%	2,082	44.1%	1.5%	1,972	41.8%	1.5%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	124,467	35.1%	9,036	7.2%	6.6%	8,790	7.0%	6.7%
50-64 years	102,139	28.8%	19,669	19.2%	14.4%	19,025	18.6%	14.5%
≥ 65 years	121,603	34.3%	107,751	88.6%	78.9%	102,744	84.4%	78.6%
Invalid/Missing Age	6,006	1.6%	20	0.3%	0.0%	18	0.2%	0.0%
GENDER ¹⁶								
Female	37,555	10.6%	5,034	13.4%	3.6%	4,724	12.5%	3.6%
Male	316,285	89.2%	131,442	41.5%	96.3%	125,853	39.7%	96.3%
Missing Gender	375	0.1%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	212,445	59.9%	92,284	43.4%	67.6%	88,429	41.6%	67.7%
Low Priority	49,038	13.8%	19,821	40.4%	14.5%	18,895	38.5%	14.4%
Priority Level Missing	92,732	26.1%	24,371	26.2%	17.8%	23,253	25.0%	17.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 8 - VA Sunshine Healthcare Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	488,962	100.0%	229,548	46.9%	100.0%	178,892	36.5%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	197,615	40.4%	98,007	49.5%	42.6%	87,765	44.4%	49.0%
Urban	280,830	57.4%	127,014	45.2%	55.3%	87,071	31.0%	48.6%
Zip Invalid/Missing	10,517	2.1%	4,527	43.0%	1.9%	4,056	38.5%	2.2%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	457,340	93.5%	213,760	46.7%	93.1%	164,047	35.8%	91.7%
> 30 miles	21,105	4.3%	11,261	53.3%	4.9%	10,789	51.1%	6.0%
Zip Invalid/Missing	10,517	2.1%	4,527	43.0%	1.9%	4,056	38.5%	2.2%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	253,740	51.8%	115,778	45.6%	50.4%	85,737	33.7%	47.9%
> 30 miles	224,705	45.9%	109,243	48.6%	47.5%	89,099	39.6%	49.8%
Zip Invalid/Missing	10,517	2.1%	4,527	43.0%	1.9%	4,056	38.5%	2.2%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	129,823	26.5%	11,022	8.4%	4.8%	9,790	7.5%	5.4%
50-64 years	134,637	27.5%	27,054	20.0%	11.7%	22,705	16.8%	12.6%
≥ 65 years	216,290	44.2%	191,449	88.5%	83.4%	146,382	67.6%	81.8%
Invalid/Missing Age	8,212	1.6%	23	0.2%	0.0%	15	0.1%	0.0%
GENDER ¹⁶								
Female	49,404	10.1%	10,939	22.1%	4.7%	8,002	16.1%	4.4%
Male	439,106	89.8%	218,609	49.7%	95.2%	170,890	38.9%	95.5%
Missing Gender	452	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	305,807	62.5%	153,357	50.1%	66.8%	121,868	39.8%	68.1%
Low Priority	68,490	14.0%	39,520	57.7%	17.2%	29,493	43.0%	16.4%
Priority Level Missing	114,665	23.4%	36,671	31.9%	15.9%	27,531	24.0%	15.3%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 9 - VA Mid South Healthcare Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	276,097	100.0%	116,314	42.1%	100.0%	111,840	40.5%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	166,077	60.1%	76,970	46.3%	66.1%	75,132	45.2%	67.1%
Urban	106,934	38.7%	37,723	35.2%	32.4%	35,136	32.8%	31.4%
Zip Invalid/Missing	3,086	1.1%	1,621	52.5%	1.3%	1,572	50.9%	1.4%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	207,664	75.2%	80,192	38.6%	68.9%	76,384	36.7%	68.2%
> 30 miles	65,347	23.6%	34,501	52.7%	29.6%	33,884	51.8%	30.2%
Zip Invalid/Missing	3,086	1.1%	1,621	52.5%	1.3%	1,572	50.9%	1.4%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	131,605	47.6%	46,586	35.3%	40.0%	43,779	33.2%	39.1%
> 30 miles	141,406	51.2%	68,107	48.1%	58.5%	66,489	47.0%	59.4%
Zip Invalid/Missing	3,086	1.1%	1,621	52.5%	1.3%	1,572	50.9%	1.4%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	91,197	33.0%	7,249	7.9%	6.2%	7,167	7.8%	6.4%
50-64 years	77,125	27.9%	17,735	22.9%	15.2%	17,327	22.4%	15.4%
≥ 65 years	101,465	36.7%	91,319	90.0%	78.5%	87,335	86.0%	78.0%
Invalid/Missing Age	6,310	2.2%	11	0.1%	0.0%	11	0.1%	0.0%
GENDER ¹⁶								
Female	28,880	10.4%	3,085	10.6%	2.6%	2,966	10.2%	2.6%
Male	246,846	89.4%	113,229	45.8%	97.3%	108,874	44.1%	97.3%
Missing Gender	371	0.1%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	173,517	62.8%	85,057	49.0%	73.1%	82,041	47.2%	73.3%
Low Priority	32,038	11.6%	14,426	45.0%	12.4%	13,653	42.6%	12.2%
Priority Level Missing	70,542	25.5%	16,831	23.8%	14.4%	16,146	22.8%	14.4%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 10 - VA Healthcare System of Ohio

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	224,389	100.0%	94,216	41.9%	100.0%	76,753	34.2%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	79,529	35.4%	37,088	46.6%	39.3%	33,206	41.7%	43.2%
Urban	143,260	63.8%	56,259	39.2%	59.7%	42,753	29.8%	55.7%
Zip Invalid/Missing	1,600	0.7%	869	54.3%	0.9%	794	49.6%	1.0%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	215,414	96.0%	89,463	41.5%	94.9%	72,415	33.6%	94.3%
> 30 miles	7,375	3.2%	3,884	52.6%	4.1%	3,544	48.0%	4.6%
Zip Invalid/Missing	1,600	0.7%	869	54.3%	0.9%	794	49.6%	1.0%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	127,370	56.7%	48,784	38.3%	51.7%	38,047	29.8%	49.5%
> 30 miles	95,419	42.5%	44,563	46.7%	47.2%	37,912	39.7%	49.3%
Zip Invalid/Missing	1,600	0.7%	869	54.3%	0.9%	794	49.6%	1.0%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	70,472	31.4%	5,046	7.1%	5.3%	4,726	6.7%	6.1%
50-64 years	62,133	27.6%	11,086	17.8%	11.7%	9,712	15.6%	12.6%
≥ 65 years	86,229	38.4%	78,074	90.5%	82.8%	62,308	72.2%	81.1%
Invalid/Missing Age	5,555	2.4%	10	0.1%	0.0%	7	0.1%	0.0%
GENDER ¹⁶								
Female	17,404	7.7%	2,609	14.9%	2.7%	2,125	12.2%	2.7%
Male	206,522	92.0%	91,607	44.3%	97.2%	74,628	36.1%	97.2%
Missing Gender	463	0.2%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	139,009	61.9%	64,731	46.5%	68.7%	52,704	37.9%	68.6%
Low Priority	34,308	15.2%	14,546	42.3%	15.4%	11,559	33.6%	15.0%
Priority Level Missing	51,072	22.7%	14,939	29.2%	15.8%	12,490	24.4%	16.2%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 11 - Veterans In Partnership

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	261,984	100.0%	113,624	43.3%	100.0%	106,781	40.7%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	107,656	41.0%	52,931	49.1%	46.5%	51,262	47.6%	48.0%
Urban	152,781	58.3%	59,974	39.2%	52.7%	54,820	35.8%	51.3%
Zip Invalid/Missing	1,547	0.5%	719	46.4%	0.6%	699	45.1%	0.6%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	223,381	85.2%	93,982	42.0%	82.7%	87,681	39.2%	82.1%
> 30 miles	37,056	14.1%	18,923	51.0%	16.6%	18,401	49.6%	17.2%
Zip Invalid/Missing	1,547	0.5%	719	46.4%	0.6%	699	45.1%	0.6%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	140,936	53.7%	52,262	37.0%	45.9%	48,543	34.4%	45.4%
> 30 miles	119,501	45.6%	60,643	50.7%	53.3%	57,539	48.1%	53.8%
Zip Invalid/Missing	1,547	0.5%	719	46.4%	0.6%	699	45.1%	0.6%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	81,057	30.9%	6,648	8.2%	5.8%	6,505	8.0%	6.0%
50-64 years	70,525	26.9%	13,603	19.2%	11.9%	13,041	18.4%	12.2%
≥ 65 years	101,475	38.7%	93,358	92.0%	82.1%	87,220	85.9%	81.6%
Invalid/Missing Age	8,927	3.4%	15	0.1%	0.0%	15	0.1%	0.0%
GENDER ¹⁶								
Female	23,378	8.9%	3,419	14.6%	3.0%	3,219	13.7%	3.0%
Male	238,472	91.0%	110,205	46.2%	96.9%	103,562	43.4%	96.9%
Missing Gender	134	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	147,863	56.4%	72,597	49.0%	63.8%	68,249	46.1%	63.9%
Low Priority	40,505	15.4%	20,855	51.4%	18.3%	19,432	47.9%	18.1%
Priority Level Missing	73,616	28.0%	20,172	27.4%	17.7%	19,100	25.9%	17.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 12 - The Great Lakes Health Care System

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	262,905	100.0%	118,019	44.8%	100.0%	105,470	40.1%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	77,024	29.2%	38,486	49.9%	32.6%	37,359	48.5%	35.4%
Urban	184,000	69.9%	78,751	42.7%	66.7%	67,390	36.6%	63.8%
Zip Invalid/Missing	1,881	0.7%	782	41.5%	0.6%	721	38.3%	0.6%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	246,445	93.7%	108,930	44.2%	92.2%	96,529	39.1%	91.5%
> 30 miles	14,579	5.5%	8,307	56.9%	7.0%	8,220	56.3%	7.7%
Zip Invalid/Missing	1,881	0.7%	782	41.5%	0.6%	721	38.3%	0.6%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	186,221	70.8%	77,455	41.5%	65.6%	66,033	35.4%	62.6%
> 30 miles	74,803	28.4%	39,782	53.1%	33.7%	38,716	51.7%	36.7%
Zip Invalid/Missing	1,881	0.7%	782	41.5%	0.6%	721	38.3%	0.6%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	75,750	28.8%	5,110	6.7%	4.3%	4,906	6.4%	4.6%
50-64 years	69,655	26.4%	11,354	16.3%	9.6%	10,678	15.3%	10.1%
≥ 65 years	112,616	42.8%	101,545	90.1%	86.0%	89,876	79.8%	85.2%
Invalid/Missing Age	4,884	1.8%	10	0.2%	0.0%	10	0.2%	0.0%
GENDER ¹⁶								
Female	24,364	9.2%	4,062	16.6%	3.4%	3,671	15.0%	3.4%
Male	238,320	90.6%	113,957	47.8%	96.5%	101,799	42.7%	96.5%
Missing Gender	221	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	154,247	58.6%	76,461	49.5%	64.7%	67,778	43.9%	64.2%
Low Priority	51,765	19.6%	27,744	53.5%	23.5%	24,932	48.1%	23.6%
Priority Level Missing	56,893	21.6%	13,814	24.2%	11.7%	12,760	22.4%	12.0%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 13 - VA Upper Midwest Health Care Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	167,859	100.0%	78,510	46.7%	100.0%	73,732	43.9%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	95,102	56.6%	48,879	51.3%	62.2%	48,108	50.5%	65.2%
Urban	70,108	41.7%	28,148	40.1%	35.8%	24,172	34.4%	32.7%
Zip Invalid/Missing	2,649	1.5%	1,483	55.9%	1.8%	1,452	54.8%	1.9%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	113,978	67.9%	49,444	43.3%	62.9%	45,032	39.5%	61.0%
> 30 miles	51,232	30.5%	27,583	53.8%	35.1%	27,248	53.1%	36.9%
Zip Invalid/Missing	2,649	1.5%	1,483	55.9%	1.8%	1,452	54.8%	1.9%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	77,774	46.3%	30,621	39.3%	39.0%	26,399	33.9%	35.8%
> 30 miles	87,436	52.0%	46,406	53.0%	59.1%	45,881	52.4%	62.2%
Zip Invalid/Missing	2,649	1.5%	1,483	55.9%	1.8%	1,452	54.8%	1.9%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	47,617	28.3%	3,127	6.5%	3.9%	3,112	6.5%	4.2%
50-64 years	43,442	25.8%	7,418	17.0%	9.4%	7,328	16.8%	9.9%
≥ 65 years	73,973	44.0%	67,952	91.8%	86.5%	63,281	85.5%	85.8%
Invalid/Missing Age	2,827	1.6%	13	0.4%	0.0%	11	0.3%	0.0%
GENDER ¹⁶								
Female	25,904	15.4%	7,484	28.8%	9.5%	6,761	26.1%	9.1%
Male	141,812	84.4%	71,026	50.0%	90.4%	66,971	47.2%	90.8%
Missing Gender	143	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	83,992	50.0%	44,964	53.5%	57.2%	42,893	51.0%	58.1%
Low Priority	31,462	18.7%	18,404	58.4%	23.4%	17,338	55.1%	23.5%
Priority Level Missing	52,405	31.2%	15,142	28.8%	19.2%	13,501	25.7%	18.3%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 14 - Central Plains Health Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	116,426	100.0%	57,713	49.5%	100.0%	55,324	47.5%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	71,292	61.2%	40,492	56.7%	70.1%	39,811	55.8%	71.9%
Urban	44,349	38.0%	16,815	37.9%	29.1%	15,120	34.0%	27.3%
Zip Invalid/Missing	785	0.6%	406	51.7%	0.7%	393	50.0%	0.7%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	84,672	72.7%	38,728	45.7%	67.1%	36,502	43.1%	65.9%
> 30 miles	30,969	26.5%	18,579	59.9%	32.1%	18,429	59.5%	33.3%
Zip Invalid/Missing	785	0.6%	406	51.7%	0.7%	393	50.0%	0.7%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	42,053	36.1%	15,363	36.5%	26.6%	14,010	33.3%	25.3%
> 30 miles	73,588	63.2%	41,944	56.9%	72.6%	40,921	55.6%	73.9%
Zip Invalid/Missing	785	0.6%	406	51.7%	0.7%	393	50.0%	0.7%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	31,551	27.0%	2,068	6.5%	3.5%	2,040	6.4%	3.6%
50-64 years	29,448	25.2%	5,264	17.8%	9.1%	5,145	17.4%	9.2%
≥ 65 years	53,748	46.1%	50,373	93.7%	87.2%	48,132	89.5%	87.0%
Invalid/Missing Age	1,679	1.4%	8	0.4%	0.0%	7	0.4%	0.0%
GENDER ¹⁶								
Female	11,171	9.5%	2,093	18.7%	3.6%	1,977	17.6%	3.5%
Male	105,152	90.3%	55,620	52.8%	96.3%	53,347	50.7%	96.4%
Missing Gender	103	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	63,256	54.3%	33,649	53.1%	58.3%	32,338	51.1%	58.4%
Low Priority	27,843	23.9%	17,483	62.7%	30.2%	16,802	60.3%	30.3%
Priority Level Missing	25,327	21.7%	6,581	25.9%	11.4%	6,184	24.4%	11.1%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 15 - VA Heartland Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	232,377	100.0%	106,308	45.7%	100.0%	97,330	41.8%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	135,730	58.4%	69,194	50.9%	65.0%	66,922	49.3%	68.7%
Urban	95,145	40.9%	36,276	38.1%	34.1%	29,628	31.1%	30.4%
Zip Invalid/Missing	1,502	0.6%	838	55.7%	0.7%	780	51.9%	0.8%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	177,999	76.5%	77,537	43.5%	72.9%	69,342	38.9%	71.2%
> 30 miles	52,876	22.7%	27,933	52.8%	26.2%	27,208	51.4%	27.9%
Zip Invalid/Missing	1,502	0.6%	838	55.7%	0.7%	780	51.9%	0.8%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	127,071	54.6%	48,123	37.8%	45.2%	40,739	32.0%	41.8%
> 30 miles	103,804	44.6%	57,347	55.2%	53.9%	55,811	53.7%	57.3%
Zip Invalid/Missing	1,502	0.6%	838	55.7%	0.7%	780	51.9%	0.8%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	70,611	30.3%	5,749	8.1%	5.4%	5,539	7.8%	5.6%
50-64 years	63,671	27.3%	13,671	21.4%	12.8%	12,962	20.3%	13.3%
≥ 65 years	94,063	40.4%	86,880	92.3%	81.7%	78,823	83.7%	80.9%
Invalid/Missing Age	4,032	1.7%	8	0.1%	0.0%	6	0.1%	0.0%
GENDER ¹⁶								
Female	18,477	7.9%	2,478	13.4%	2.3%	2,302	12.4%	2.3%
Male	213,576	91.9%	103,830	48.6%	97.6%	95,028	44.4%	97.6%
Missing Gender	324	0.1%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	145,049	62.4%	73,621	50.7%	69.2%	67,948	46.8%	69.8%
Low Priority	36,537	15.7%	19,731	54.0%	18.5%	17,861	48.8%	18.3%
Priority Level Missing	50,791	21.8%	12,956	25.5%	12.1%	11,521	22.6%	11.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 16 - South Central VA Healthcare Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	491,372	100.0%	204,314	41.5%	100.0%	180,094	36.6%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	245,851	50.0%	119,579	48.6%	58.5%	109,720	44.6%	60.9%
Urban	240,974	49.0%	82,528	34.2%	40.3%	68,294	28.3%	37.9%
Zip Invalid/Missing	4,547	0.9%	2,207	48.5%	1.0%	2,080	45.7%	1.1%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	347,776	70.7%	133,306	38.3%	65.2%	114,904	33.0%	63.8%
> 30 miles	139,049	28.2%	68,801	49.4%	33.6%	63,110	45.3%	35.0%
Zip Invalid/Missing	4,547	0.9%	2,207	48.5%	1.0%	2,080	45.7%	1.1%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	208,466	42.4%	70,611	33.8%	34.5%	59,473	28.5%	33.0%
> 30 miles	278,359	56.6%	131,496	47.2%	64.3%	118,541	42.5%	65.8%
Zip Invalid/Missing	4,547	0.9%	2,207	48.5%	1.0%	2,080	45.7%	1.1%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	152,868	31.1%	11,159	7.2%	5.4%	10,579	6.9%	5.8%
50-64 years	147,666	30.0%	28,931	19.5%	14.1%	26,549	17.9%	14.7%
≥ 65 years	184,021	37.4%	164,197	89.2%	80.3%	142,943	77.6%	79.3%
Invalid/Missing Age	6,817	1.3%	27	0.3%	0.0%	23	0.3%	0.0%
GENDER ¹⁶								
Female	42,919	8.7%	5,545	12.9%	2.7%	4,938	11.5%	2.7%
Male	447,658	91.1%	198,769	44.4%	97.2%	175,156	39.1%	97.2%
Missing Gender	795	0.1%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	329,920	67.1%	152,191	46.1%	74.4%	134,637	40.8%	74.7%
Low Priority	52,687	10.7%	20,786	39.4%	10.1%	18,122	34.3%	10.0%
Priority Level Missing	108,765	22.1%	31,337	28.8%	15.3%	27,335	25.1%	15.1%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 17 - VA Heart of Texas Health Care Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	268,802	100.0%	98,631	36.6%	100.0%	78,671	29.2%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	100,761	37.4%	46,737	46.3%	47.3%	40,903	40.5%	51.9%
Urban	166,264	61.8%	51,044	30.7%	51.7%	37,002	22.2%	47.0%
Zip Invalid/Missing	1,777	0.6%	850	47.8%	0.8%	766	43.1%	0.9%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	248,460	92.4%	89,206	35.9%	90.4%	70,037	28.1%	89.0%
> 30 miles	18,565	6.9%	8,575	46.1%	8.6%	7,868	42.3%	10.0%
Zip Invalid/Missing	1,777	0.6%	850	47.8%	0.8%	766	43.1%	0.9%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	149,608	55.6%	46,931	31.3%	47.5%	33,639	22.4%	42.7%
> 30 miles	117,417	43.6%	50,850	43.3%	51.5%	44,266	37.6%	56.2%
Zip Invalid/Missing	1,777	0.6%	850	47.8%	0.8%	766	43.1%	0.9%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	93,169	34.6%	4,614	4.9%	4.6%	4,225	4.5%	5.3%
50-64 years	81,135	30.1%	11,748	14.4%	11.9%	10,226	12.6%	12.9%
≥ 65 years	91,406	34.0%	82,263	89.9%	83.4%	64,216	70.2%	81.6%
Invalid/Missing Age	3,092	1.1%	6	0.1%	0.0%	4	0.1%	0.0%
GENDER ¹⁶								
Female	32,140	11.9%	3,971	12.3%	4.0%	3,081	9.5%	3.9%
Male	236,424	87.9%	94,660	40.0%	95.9%	75,590	31.9%	96.0%
Missing Gender	238	0.0%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	166,010	61.7%	70,573	42.5%	71.5%	57,663	34.7%	73.2%
Low Priority	29,280	10.8%	11,229	38.3%	11.3%	9,066	30.9%	11.5%
Priority Level Missing	73,512	27.3%	16,829	22.8%	17.0%	11,942	16.2%	15.1%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 18 - VA Southwest Health Care Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	283,320	100.0%	110,235	38.9%	100.0%	86,921	30.6%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	111,754	39.4%	51,711	46.2%	46.9%	44,248	39.5%	50.9%
Urban	168,932	59.6%	57,206	33.8%	51.8%	41,539	24.5%	47.7%
Zip Invalid/Missing	2,634	0.9%	1,318	50.0%	1.1%	1,134	43.0%	1.3%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	240,106	84.7%	88,101	36.6%	79.9%	67,050	27.9%	77.1%
> 30 miles	40,580	14.3%	20,816	51.2%	18.8%	18,737	46.1%	21.5%
Zip Invalid/Missing	2,634	0.9%	1,318	50.0%	1.1%	1,134	43.0%	1.3%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	160,219	56.5%	54,129	33.7%	49.1%	36,638	22.8%	42.1%
> 30 miles	120,467	42.5%	54,788	45.4%	49.7%	49,149	40.7%	56.5%
Zip Invalid/Missing	2,634	0.9%	1,318	50.0%	1.1%	1,134	43.0%	1.3%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	91,238	32.2%	5,107	5.5%	4.6%	4,581	5.0%	5.2%
50-64 years	79,545	28.0%	13,323	16.7%	12.0%	11,354	14.2%	13.0%
≥ 65 years	102,869	36.3%	91,795	89.2%	83.2%	70,979	68.9%	81.6%
Invalid/Missing Age	9,668	3.4%	10	0.1%	0.0%	7	0.0%	0.0%
GENDER ¹⁶								
Female	45,309	15.9%	7,758	17.1%	7.0%	5,819	12.8%	6.6%
Male	237,635	83.8%	102,477	43.1%	92.9%	81,102	34.1%	93.3%
Missing Gender	376	0.1%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	160,665	56.7%	75,499	46.9%	68.4%	60,530	37.6%	69.6%
Low Priority	37,087	13.0%	18,135	48.8%	16.4%	14,289	38.5%	16.4%
Priority Level Missing	85,568	30.2%	16,601	19.4%	15.0%	12,102	14.1%	13.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 19 - Rocky Mountain Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	170,617	100.0%	69,156	40.5%	100.0%	59,872	35.0%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	70,473	41.3%	32,987	46.8%	47.6%	31,054	44.0%	51.8%
Urban	96,083	56.3%	34,050	35.4%	49.2%	26,820	27.9%	44.7%
Zip Invalid/Missing	4,061	2.3%	2,119	52.1%	3.0%	1,998	49.1%	3.3%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	137,130	80.3%	51,824	37.7%	74.9%	43,178	31.4%	72.1%
> 30 miles	29,426	17.2%	15,213	51.6%	21.9%	14,696	49.9%	24.5%
Zip Invalid/Missing	4,061	2.3%	2,119	52.1%	3.0%	1,998	49.1%	3.3%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	76,013	44.5%	26,456	34.8%	38.2%	21,385	28.1%	35.7%
> 30 miles	90,543	53.0%	40,581	44.8%	58.6%	36,489	40.3%	60.9%
Zip Invalid/Missing	4,061	2.3%	2,119	52.1%	3.0%	1,998	49.1%	3.3%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	54,927	32.1%	3,772	6.8%	5.4%	3,615	6.5%	6.0%
50-64 years	50,750	29.7%	8,528	16.8%	12.3%	7,842	15.4%	13.0%
≥ 65 years	62,344	36.5%	56,847	91.1%	82.2%	48,406	77.6%	80.8%
Invalid/Missing Age	2,596	1.5%	9	0.3%	0.0%	9	0.3%	0.0%
GENDER ¹⁶								
Female	16,206	9.4%	2,480	15.3%	3.5%	2,169	13.3%	3.6%
Male	153,961	90.2%	66,676	43.3%	96.4%	57,703	37.4%	96.3%
Missing Gender	450	0.2%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	99,708	58.4%	45,091	45.2%	65.2%	39,696	39.8%	66.3%
Low Priority	28,412	16.6%	13,804	48.5%	19.9%	12,371	43.5%	20.6%
Priority Level Missing	42,497	24.9%	10,261	24.1%	14.8%	7,805	18.3%	13.0%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 20 - Northwest Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	257,702	100.0%	92,616	35.9%	100.0%	73,212	28.4%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	117,202	45.4%	49,750	42.4%	53.7%	42,288	36.0%	57.7%
Urban	139,281	54.0%	42,399	30.4%	45.7%	30,508	21.9%	41.6%
Zip Invalid/Missing	1,219	0.4%	467	38.3%	0.5%	416	34.1%	0.5%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	206,660	80.1%	69,723	33.7%	75.2%	52,517	25.4%	71.7%
> 30 miles	49,823	19.3%	22,426	45.0%	24.2%	20,279	40.7%	27.6%
Zip Invalid/Missing	1,219	0.4%	467	38.3%	0.5%	416	34.1%	0.5%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	141,737	55.0%	45,063	31.7%	48.6%	32,802	23.1%	44.8%
> 30 miles	114,746	44.5%	47,086	41.0%	50.8%	39,994	34.8%	54.6%
Zip Invalid/Missing	1,219	0.4%	467	38.3%	0.5%	416	34.1%	0.5%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	93,791	36.3%	5,767	6.1%	6.2%	5,525	5.8%	7.5%
50-64 years	78,261	30.3%	13,093	16.7%	14.1%	11,802	15.0%	16.1%
≥ 65 years	81,386	31.5%	73,745	90.6%	79.6%	55,877	68.6%	76.3%
Invalid/Missing Age	4,264	1.6%	11	0.2%	0.0%	8	0.1%	0.0%
GENDER ¹⁶								
Female	28,703	11.1%	4,863	16.9%	5.2%	3,714	12.9%	5.0%
Male	228,192	88.5%	87,753	38.4%	94.7%	69,498	30.4%	94.9%
Missing Gender	807	0.3%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	156,586	60.7%	63,737	40.7%	68.8%	52,511	33.5%	71.7%
Low Priority	32,061	12.4%	12,823	39.9%	13.8%	9,395	29.3%	12.8%
Priority Level Missing	69,055	26.7%	16,056	23.2%	17.3%	11,306	16.3%	15.4%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 21 - Sierra Pacific Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	284,403	100.0%	108,472	38.1%	100.0%	77,949	27.4%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	74,059	26.0%	34,074	46.0%	31.4%	27,499	37.1%	35.2%
Urban	203,576	71.5%	73,260	35.9%	67.5%	49,439	24.2%	63.4%
Zip Invalid/Missing	6,768	2.3%	1,138	16.8%	1.0%	1,011	14.9%	1.2%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	261,434	91.9%	99,398	38.0%	91.6%	69,917	26.7%	89.6%
> 30 miles	16,201	5.6%	7,936	48.9%	7.3%	7,021	43.3%	9.0%
Zip Invalid/Missing	6,768	2.3%	1,138	16.8%	1.0%	1,011	14.9%	1.2%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	183,083	64.3%	64,206	35.0%	59.1%	42,147	23.0%	54.0%
> 30 miles	94,552	33.2%	43,128	45.6%	39.7%	34,791	36.7%	44.6%
Zip Invalid/Missing	6,768	2.3%	1,138	16.8%	1.0%	1,011	14.9%	1.2%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	87,519	30.7%	6,103	6.9%	5.6%	5,640	6.4%	7.2%
50-64 years	84,721	29.7%	13,777	16.2%	12.7%	11,889	14.0%	15.2%
≥ 65 years	104,892	36.8%	88,575	84.4%	81.6%	60,412	57.5%	77.5%
Invalid/Missing Age	7,271	2.5%	17	0.2%	0.0%	8	0.1%	0.0%
GENDER ¹⁶								
Female	37,227	13.0%	5,889	15.8%	5.4%	3,769	10.1%	4.8%
Male	245,920	86.4%	102,583	41.7%	94.5%	74,180	30.1%	95.1%
Missing Gender	1,256	0.4%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	161,284	56.7%	69,949	43.3%	64.4%	53,095	32.9%	68.1%
Low Priority	40,068	14.0%	18,877	47.1%	17.4%	12,526	31.2%	16.0%
Priority Level Missing	83,051	29.2%	19,646	23.6%	18.1%	12,328	14.8%	15.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: 22 - Desert Pacific Healthcare Network

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	353,453	100.0%	121,766	34.4%	100.0%	69,930	19.7%	100.0%
TYPE OF ZIP CODE ¹³								
Rural	39,055	11.0%	17,120	43.8%	14.0%	10,190	26.0%	14.5%
Urban	310,548	87.8%	103,148	33.2%	84.7%	58,796	18.9%	84.0%
Zip Invalid/Missing	3,850	1.0%	1,498	38.9%	1.2%	944	24.5%	1.3%
OUTPATIENT DISTANCE ¹⁴								
≤ 30 miles	342,207	96.8%	117,179	34.2%	96.2%	66,736	19.5%	95.4%
> 30 miles	7,396	2.0%	3,089	41.7%	2.5%	2,250	30.4%	3.2%
Zip Invalid/Missing	3,850	1.0%	1,498	38.9%	1.2%	944	24.5%	1.3%
INPATIENT DISTANCE ¹⁴								
≤ 30 miles	298,091	84.3%	98,637	33.0%	81.0%	55,764	18.7%	79.7%
> 30 miles	51,512	14.5%	21,631	41.9%	17.7%	13,222	25.6%	18.9%
Zip Invalid/Missing	3,850	1.0%	1,498	38.9%	1.2%	944	24.5%	1.3%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	126,586	35.8%	6,629	5.2%	5.4%	5,854	4.6%	8.3%
50-64 years	105,674	29.8%	14,759	13.9%	12.1%	11,202	10.6%	16.0%
≥ 65 years	114,483	32.3%	100,360	87.6%	82.4%	52,863	46.1%	75.5%
Invalid/Missing Age	6,710	1.8%	18	0.2%	0.0%	11	0.1%	0.0%
GENDER ¹⁶								
Female	36,679	10.3%	6,015	16.3%	4.9%	3,181	8.6%	4.5%
Male	316,383	89.5%	115,751	36.5%	95.0%	66,749	21.0%	95.4%
Missing Gender	391	0.1%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	204,941	57.9%	76,874	37.5%	63.1%	46,341	22.6%	66.2%
Low Priority	53,102	15.0%	20,828	39.2%	17.1%	11,045	20.7%	15.7%
Priority Level Missing	95,410	26.9%	24,064	25.2%	19.7%	12,544	13.1%	17.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 3 – Medicare Enrollment Among Veterans

VHS VISN ¹²: No VISN data available

Overall Cohort	ENROLLMENT DETAIL							
	VIReC Veterans Cohort (Sampling Frame) ¹		Medicare Enrolled Veterans ²			Medicare Enrolled Veterans (FFS only) ³		
	Number of Veterans	Col %	Number of Veterans	% of Sampling Frame	Col %	Number of Veterans	% of Sampling Frame	Col %
*** TOTAL VETERANS ***	44,330	100.0%	9,970	22.4%	100.0%	8,392	18.9%	100.0%
TYPE OF ZIP CODE ¹³								
Zip Invalid/Missing	44,330	100.0%	9,970	22.4%	100.0%	8,392	18.9%	100.0%
OUTPATIENT DISTANCE ¹⁴								
Zip Invalid/Missing	44,330	100.0%	9,970	22.4%	100.0%	8,392	18.9%	100.0%
INPATIENT DISTANCE ¹⁴								
Zip Invalid/Missing	44,330	100.0%	9,970	22.4%	100.0%	8,392	18.9%	100.0%
AGE AS OF 01/01/1999 ¹⁵								
< 50 years	14,303	32.2%	267	1.8%	2.6%	252	1.7%	3.0%
50-64 years	12,165	27.4%	677	5.5%	6.7%	618	5.0%	7.3%
≥ 65 years	15,904	35.8%	9,020	56.7%	90.4%	7,517	47.2%	89.5%
Invalid/Missing Age	1,958	4.4%	6	0.3%	0.0%	5	0.2%	0.0%
GENDER ¹⁶								
Female	1,400	3.1%	113	8.0%	1.1%	85	6.0%	1.0%
Male	42,561	96.0%	9,857	23.1%	98.8%	8,307	19.5%	98.9%
Missing Gender	369	0.8%	0	0	0	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷								
High Priority	1,091	2.4%	422	38.6%	4.2%	354	32.4%	4.2%
Low Priority	420	0.9%	97	23.0%	0.9%	82	19.5%	0.9%
Priority Level Missing	42,819	96.5%	9,451	22.0%	94.7%	7,956	18.5%	94.8%

Table 3 – Medicare Enrollment Among Veterans
Variable Definitions and Descriptions

1. VIReC Veterans Cohort (Sampling Frame/Finder File): Included veterans who met at least one of the following criteria from fiscal year 1997 through 2000: used VHA services, enrolled in the VHA health system, or received compensation or pension benefits from the VA. The file draws from several data sources:

- Office of Policy and Planning (OPP) Enrollment File as of December 1999,
- VISN Support Service Center (VSSC) Unique User File for October 1997-September 2000,
- Veterans Benefits Administration (VBA) Compensation and Pension Non-Users File, and
- The Allocation Resource Center (ARC) Pharmacy Only Users File from October 1997-September 1999.

Demographic information for each veteran, used for comparing to the Medicare demographic data during the match process, was also obtained from these sources.

2. Medicare Enrolled Veterans: Veterans in the CMS Denominator file (eligible for Medicare benefits during CY 1999) whose SSN matched an SSN in the sampling frame, and who also matched on gender and at least 2 of the 3 parts of the date of birth (month/year, day/year, month/day), and who were alive as of January 1, 1999.

3. Medicare Enrolled Veterans (FFS only): Veterans enrolled in Medicare (see Note 2), but not enrolled in a Medicare + Choice plan at any time during 1999.

12. VISN: Veteran's Integrated Service Network is based on the zip code of the veteran's residence. See Appendix E, Section I for details.

13. Type of zip code: Urban/Rural designation. See Appendix E, Section I for details.

14. Outpatient and inpatient distance: Distance between veteran's residence zip code and the nearest inpatient and outpatient VA facility. See Appendix E, Section I for details.

15. Age: Veteran's age as of 01/01/1999. See Appendix E, Section II for details.

16. Gender: Sex of the veteran. See Appendix E, Section III for details.

17. Constructed Priority Level: This variable was constructed by VIReC based on three different variables: "Priority Level", "Means Test", and "Service Connected Status". High Priority includes veterans with "Priority Level" 1-6, "Means Test" Category A, or "Service Connected Status" 10-100%. Low Priority includes veterans with "Priority Level" 7 or "Means Test" Category C. See Appendix E, Section IV for details.

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

NATIONAL SUMMARY

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,186,004	100.0%	100.0%	480,132	21.9%	100.0%	663,622	30.3%	100.0%	932,021	42.6%	100.0%	110,229	5.0%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	1,070,164	100.0%	48.9%	219,207	20.4%	45.6%	310,704	29.0%	46.8%	495,003	46.2%	53.1%	45,250	4.2%	41.0%
Urban	1,081,108	100.0%	49.4%	252,173	23.3%	52.5%	344,445	31.8%	51.9%	422,001	39.0%	45.2%	62,489	5.7%	56.6%
Zip Invalid/Missing	34,732	100.0%	1.5%	8,752	25.1%	1.8%	8,473	24.3%	1.2%	15,017	43.2%	1.6%	2,490	7.1%	2.2%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	1,795,713	100.0%	82.1%	405,774	22.5%	84.5%	547,912	30.5%	82.5%	748,595	41.6%	80.3%	93,432	5.2%	84.7%
> 30 miles	355,559	100.0%	16.2%	65,606	18.4%	13.6%	107,237	30.1%	16.1%	168,409	47.3%	18.0%	14,307	4.0%	12.9%
Zip Invalid/Missing	34,732	100.0%	1.5%	8,752	25.1%	1.8%	8,473	24.3%	1.2%	15,017	43.2%	1.6%	2,490	7.1%	2.2%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	1,116,142	100.0%	51.0%	290,603	26.0%	60.5%	332,992	29.8%	50.1%	427,408	38.2%	45.8%	65,139	5.8%	59.0%
> 30 miles	1,035,130	100.0%	47.3%	180,777	17.4%	37.6%	322,157	31.1%	48.5%	489,596	47.2%	52.5%	42,600	4.1%	38.6%
Zip Invalid/Missing	34,732	100.0%	1.5%	8,752	25.1%	1.8%	8,473	24.3%	1.2%	15,017	43.2%	1.6%	2,490	7.1%	2.2%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	122,656	100.0%	5.6%	50,989	41.5%	10.6%	16,863	13.7%	2.5%	45,057	36.7%	4.8%	9,747	7.9%	8.8%
50-64 years	279,300	100.0%	12.7%	112,384	40.2%	23.4%	41,466	14.8%	6.2%	103,519	37.0%	11.1%	21,931	7.8%	19.8%
≥ 65 years	1,783,810	100.0%	81.6%	316,743	17.7%	65.9%	605,128	33.9%	91.1%	783,417	43.9%	84.0%	78,522	4.4%	71.2%
Invalid/Missing Age	238	100.0%	0.0%	16	6.7%	0.0%	165	69.3%	0.0%	28	11.7%	0.0%	29	12.1%	0.0%
GENDER ¹⁶															
Female	81,547	100.0%	3.7%	14,210	17.4%	2.9%	31,739	38.9%	4.7%	29,333	35.9%	3.1%	6,265	7.6%	5.6%
Male	2,104,457	100.0%	96.2%	465,922	22.1%	97.0%	631,883	30.0%	95.2%	902,688	42.8%	96.8%	103,964	4.9%	94.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	1,452,478	100.0%	66.4%	441,827	30.4%	92.0%	223,108	15.3%	33.6%	737,197	50.7%	79.0%	50,346	3.4%	45.6%
Low Priority	392,457	100.0%	17.9%	33,436	8.5%	6.9%	162,169	41.3%	24.4%	177,441	45.2%	19.0%	19,411	4.9%	17.6%
Priority Level Missing	341,069	100.0%	15.6%	4,869	1.4%	1.0%	278,345	81.6%	41.9%	17,383	5.0%	1.8%	40,472	11.8%	36.7%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 1 - VA New England Healthcare System

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE												
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹			
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	
*** TOTAL VETERANS ***	115,698	100.0%	100.0%	23,751	20.5%	100.0%	38,962	33.6%	100.0%	47,026	40.6%	100.0%	5,959	5.1%	100.0%	
TYPE OF ZIP CODE ¹³																
Rural	45,198	100.0%	39.0%	8,768	19.3%	36.9%	14,603	32.3%	37.4%	19,777	43.7%	42.0%	2,050	4.5%	34.4%	
Urban	69,605	100.0%	60.1%	14,720	21.1%	61.9%	24,229	34.8%	62.1%	26,774	38.4%	56.9%	3,882	5.5%	65.1%	
Zip Invalid/Missing	895	100.0%	0.7%	263	29.3%	1.1%	130	14.5%	0.3%	475	53.0%	1.0%	27	3.0%	0.4%	
OUTPATIENT DISTANCE ¹⁴																
≤ 30 miles	110,344	100.0%	95.3%	22,659	20.5%	95.4%	37,580	34.0%	96.4%	44,353	40.1%	94.3%	5,752	5.2%	96.5%	
> 30 miles	4,459	100.0%	3.8%	829	18.5%	3.4%	1,252	28.0%	3.2%	2,198	49.2%	4.6%	180	4.0%	3.0%	
Zip Invalid/Missing	895	100.0%	0.7%	263	29.3%	1.1%	130	14.5%	0.3%	475	53.0%	1.0%	27	3.0%	0.4%	
INPATIENT DISTANCE ¹⁴																
≤ 30 miles	79,759	100.0%	68.9%	18,249	22.8%	76.8%	26,075	32.6%	66.9%	30,990	38.8%	65.8%	4,445	5.5%	74.5%	
> 30 miles	35,044	100.0%	30.2%	5,239	14.9%	22.0%	12,757	36.4%	32.7%	15,561	44.4%	33.0%	1,487	4.2%	24.9%	
Zip Invalid/Missing	895	100.0%	0.7%	263	29.3%	1.1%	130	14.5%	0.3%	475	53.0%	1.0%	27	3.0%	0.4%	
AGE AS OF 01/01/1999 ¹⁵																
< 50 years	6,496	100.0%	5.6%	2,481	38.1%	10.4%	989	15.2%	2.5%	2,589	39.8%	5.5%	437	6.7%	7.3%	
50-64 years	13,642	100.0%	11.7%	5,620	41.1%	23.6%	1,915	14.0%	4.9%	4,954	36.3%	10.5%	1,153	8.4%	19.3%	
≥ 65 years	95,547	100.0%	82.5%	15,650	16.3%	65.8%	36,047	37.7%	92.5%	39,481	41.3%	83.9%	4,369	4.5%	73.3%	
Invalid/Missing Age	13	100.0%	0.0%	0	0	0	11	84.6%	0.0%	2	15.3%	0.0%	0	0	0	
GENDER ¹⁶																
Female	4,394	100.0%	3.7%	645	14.6%	2.7%	1,804	41.0%	4.6%	1,631	37.1%	3.4%	314	7.1%	5.2%	
Male	111,304	100.0%	96.2%	23,106	20.7%	97.2%	37,158	33.3%	95.3%	45,395	40.7%	96.5%	5,645	5.0%	94.7%	
CONSTRUCTED PRIORITY LEVEL ¹⁷																
High Priority	73,852	100.0%	63.8%	21,664	29.3%	91.2%	12,074	16.3%	30.9%	37,864	51.2%	80.5%	2,250	3.0%	37.7%	
Low Priority	20,093	100.0%	17.3%	1,852	9.2%	7.7%	8,708	43.3%	22.3%	8,287	41.2%	17.6%	1,246	6.2%	20.9%	
Priority Level Missing	21,753	100.0%	18.8%	235	1.0%	0.9%	18,180	83.5%	46.6%	875	4.0%	1.8%	2,463	11.3%	41.3%	

Note: See attached footnotes for variable definitions and descriptions.
VIREC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 2 - VA Healthcare Network Upstate New York

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	73,773	100.0%	100.0%	15,217	20.6%	100.0%	22,561	30.5%	100.0%	32,881	44.5%	100.0%	3,114	4.2%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	40,986	100.0%	55.5%	7,940	19.3%	52.1%	12,670	30.9%	56.1%	18,730	45.6%	56.9%	1,646	4.0%	52.8%
Urban	32,106	100.0%	43.5%	7,084	22.0%	46.5%	9,827	30.6%	43.5%	13,746	42.8%	41.8%	1,449	4.5%	46.5%
Zip Invalid/Missing	681	100.0%	0.9%	193	28.3%	1.2%	64	9.3%	0.2%	405	59.4%	1.2%	19	2.7%	0.6%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	71,630	100.0%	97.0%	14,808	20.6%	97.3%	21,977	30.6%	97.4%	31,803	44.3%	96.7%	3,042	4.2%	97.6%
> 30 miles	1,462	100.0%	1.9%	216	14.7%	1.4%	520	35.5%	2.3%	673	46.0%	2.0%	53	3.6%	1.7%
Zip Invalid/Missing	681	100.0%	0.9%	193	28.3%	1.2%	64	9.3%	0.2%	405	59.4%	1.2%	19	2.7%	0.6%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	45,257	100.0%	61.3%	10,700	23.6%	70.3%	13,976	30.8%	61.9%	18,434	40.7%	56.0%	2,147	4.7%	68.9%
> 30 miles	27,835	100.0%	37.7%	4,324	15.5%	28.4%	8,521	30.6%	37.7%	14,042	50.4%	42.7%	948	3.4%	30.4%
Zip Invalid/Missing	681	100.0%	0.9%	193	28.3%	1.2%	64	9.3%	0.2%	405	59.4%	1.2%	19	2.7%	0.6%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	3,390	100.0%	4.5%	1,403	41.3%	9.2%	428	12.6%	1.8%	1,289	38.0%	3.9%	270	7.9%	8.6%
50-64 years	8,284	100.0%	11.2%	3,242	39.1%	21.3%	1,261	15.2%	5.5%	3,152	38.0%	9.5%	629	7.5%	20.1%
≥ 65 years	62,092	100.0%	84.1%	10,572	17.0%	69.4%	20,868	33.6%	92.4%	28,439	45.8%	86.4%	2,213	3.5%	71.0%
Invalid/Missing Age	7	100.0%	0.0%	0	0	0	4	57.1%	0.0%	1	14.2%	0.0%	2	28.5%	0.0%
GENDER ¹⁶															
Female	2,659	100.0%	3.6%	430	16.1%	2.8%	991	37.2%	4.3%	1,083	40.7%	3.2%	155	5.8%	4.9%
Male	71,114	100.0%	96.3%	14,787	20.7%	97.1%	21,570	30.3%	95.6%	31,798	44.7%	96.7%	2,959	4.1%	95.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	47,779	100.0%	64.7%	13,493	28.2%	88.6%	7,990	16.7%	35.4%	24,945	52.2%	75.8%	1,351	2.8%	43.3%
Low Priority	17,588	100.0%	23.8%	1,590	9.0%	10.4%	7,789	44.2%	34.5%	7,285	41.4%	22.1%	924	5.2%	29.6%
Priority Level Missing	8,406	100.0%	11.3%	134	1.5%	0.8%	6,782	80.6%	30.0%	651	7.7%	1.9%	839	9.9%	26.9%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 3 - VA NY/NJ Veterans Healthcare Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE												
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹			
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	
*** TOTAL VETERANS ***	126,483	100.0%	100.0%	20,983	16.5%	100.0%	47,909	37.8%	100.0%	50,169	39.6%	100.0%	7,422	5.8%	100.0%	
TYPE OF ZIP CODE ¹³																
Rural	11,316	100.0%	8.9%	1,511	13.3%	7.2%	4,559	40.2%	9.5%	4,643	41.0%	9.2%	603	5.3%	8.1%	
Urban	114,700	100.0%	90.6%	19,342	16.8%	92.1%	43,253	37.7%	90.2%	45,315	39.5%	90.3%	6,790	5.9%	91.4%	
Zip Invalid/Missing	467	100.0%	0.3%	130	27.8%	0.6%	97	20.7%	0.2%	211	45.1%	0.4%	29	6.2%	0.3%	
OUTPATIENT DISTANCE ¹⁴																
≤ 30 miles	126,016	100.0%	99.6%	20,853	16.5%	99.3%	47,812	37.9%	99.7%	49,958	39.6%	99.5%	7,393	5.8%	99.6%	
Zip Invalid/Missing	467	100.0%	0.3%	130	27.8%	0.6%	97	20.7%	0.2%	211	45.1%	0.4%	29	6.2%	0.3%	
INPATIENT DISTANCE ¹⁴																
≤ 30 miles	116,335	100.0%	91.9%	19,968	17.1%	95.1%	43,737	37.5%	91.2%	45,613	39.2%	90.9%	7,017	6.0%	94.5%	
> 30 miles	9,681	100.0%	7.6%	885	9.1%	4.2%	4,075	42.0%	8.5%	4,345	44.8%	8.6%	376	3.8%	5.0%	
Zip Invalid/Missing	467	100.0%	0.3%	130	27.8%	0.6%	97	20.7%	0.2%	211	45.1%	0.4%	29	6.2%	0.3%	
AGE AS OF 01/01/1999 ¹⁵																
< 50 years	4,589	100.0%	3.6%	1,765	38.4%	8.4%	811	17.6%	1.6%	1,588	34.6%	3.1%	425	9.2%	5.7%	
50-64 years	11,530	100.0%	9.1%	4,076	35.3%	19.4%	2,351	20.3%	4.9%	3,708	32.1%	7.3%	1,395	12.0%	18.7%	
≥ 65 years	110,349	100.0%	87.2%	15,140	13.7%	72.1%	44,736	40.5%	93.3%	44,872	40.6%	89.4%	5,601	5.0%	75.4%	
Invalid/Missing Age	15	100.0%	0.0%	2	13.3%	0.0%	11	73.3%	0.0%	1	6.6%	0.0%	1	6.6%	0.0%	
GENDER ¹⁶																
Female	3,058	100.0%	2.4%	437	14.2%	2.0%	1,300	42.5%	2.7%	1,063	34.7%	2.1%	258	8.4%	3.4%	
Male	123,425	100.0%	97.5%	20,546	16.6%	97.9%	46,609	37.7%	97.2%	49,106	39.7%	97.8%	7,164	5.8%	96.5%	
CONSTRUCTED PRIORITY LEVEL ¹⁷																
High Priority	66,417	100.0%	52.5%	17,244	25.9%	82.1%	15,264	22.9%	31.8%	30,831	46.4%	61.4%	3,078	4.6%	41.4%	
Low Priority	42,959	100.0%	33.9%	3,531	8.2%	16.8%	18,273	42.5%	38.1%	18,665	43.4%	37.2%	2,490	5.7%	33.5%	
Priority Level Missing	17,107	100.0%	13.5%	208	1.2%	0.9%	14,372	84.0%	29.9%	673	3.9%	1.3%	1,854	10.8%	24.9%	

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 4 - VA Stars & Stripes Healthcare Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	131,202	100.0%	100.0%	22,525	17.1%	100.0%	43,358	33.0%	100.0%	58,729	44.7%	100.0%	6,590	5.0%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	64,288	100.0%	48.9%	10,753	16.7%	47.7%	20,290	31.5%	46.7%	30,585	47.5%	52.0%	2,660	4.1%	40.3%
Urban	65,886	100.0%	50.2%	11,527	17.4%	51.1%	22,950	34.8%	52.9%	27,498	41.7%	46.8%	3,911	5.9%	59.3%
Zip Invalid/Missing	1,028	100.0%	0.7%	245	23.8%	1.0%	118	11.4%	0.2%	646	62.8%	1.0%	19	1.8%	0.2%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	127,386	100.0%	97.0%	21,896	17.1%	97.2%	42,135	33.0%	97.1%	56,900	44.6%	96.8%	6,455	5.0%	97.9%
> 30 miles	2,788	100.0%	2.1%	384	13.7%	1.7%	1,105	39.6%	2.5%	1,183	42.4%	2.0%	116	4.1%	1.7%
Zip Invalid/Missing	1,028	100.0%	0.7%	245	23.8%	1.0%	118	11.4%	0.2%	646	62.8%	1.0%	19	1.8%	0.2%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	85,169	100.0%	64.9%	16,265	19.0%	72.2%	27,904	32.7%	64.3%	36,217	42.5%	61.6%	4,783	5.6%	72.5%
> 30 miles	45,005	100.0%	34.3%	6,015	13.3%	26.7%	15,336	34.0%	35.3%	21,866	48.5%	37.2%	1,788	3.9%	27.1%
Zip Invalid/Missing	1,028	100.0%	0.7%	245	23.8%	1.0%	118	11.4%	0.2%	646	62.8%	1.0%	19	1.8%	0.2%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	5,648	100.0%	4.3%	2,090	37.0%	9.2%	828	14.6%	1.9%	2,278	40.3%	3.8%	452	8.0%	6.8%
50-64 years	14,379	100.0%	10.9%	5,242	36.4%	23.2%	2,323	16.1%	5.3%	5,578	38.7%	9.4%	1,236	8.5%	18.7%
≥ 65 years	111,165	100.0%	84.7%	15,193	13.6%	67.4%	40,199	36.1%	92.7%	50,872	45.7%	86.6%	4,901	4.4%	74.3%
Invalid/Missing Age	10	100.0%	0.0%	0	0	0	8	80.0%	0.0%	1	10.0%	0.0%	1	10.0%	0.0%
GENDER ¹⁶															
Female	3,367	100.0%	2.5%	556	16.5%	2.4%	1,276	37.8%	2.9%	1,300	38.6%	2.2%	235	6.9%	3.5%
Male	127,835	100.0%	97.4%	21,969	17.1%	97.5%	42,082	32.9%	97.0%	57,429	44.9%	97.7%	6,355	4.9%	96.4%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	83,006	100.0%	63.2%	20,127	24.2%	89.3%	16,257	19.5%	37.4%	43,625	52.5%	74.2%	2,997	3.6%	45.4%
Low Priority	29,754	100.0%	22.6%	2,249	7.5%	9.9%	11,352	38.1%	26.1%	14,661	49.2%	24.9%	1,492	5.0%	22.6%
Priority Level Missing	18,442	100.0%	14.0%	149	0.8%	0.6%	15,749	85.3%	36.3%	443	2.4%	0.7%	2,101	11.3%	31.8%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 5 - VA Capital Health Care Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	50,762	100.0%	100.0%	13,342	26.2%	100.0%	14,705	28.9%	100.0%	18,476	36.3%	100.0%	4,239	8.3%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	18,312	100.0%	36.0%	4,466	24.3%	33.4%	5,031	27.4%	34.2%	7,868	42.9%	42.5%	947	5.1%	22.3%
Urban	31,923	100.0%	62.8%	8,661	27.1%	64.9%	9,621	30.1%	65.4%	10,365	32.4%	56.0%	3,276	10.2%	77.2%
Zip Invalid/Missing	527	100.0%	1.0%	215	40.7%	1.6%	53	10.0%	0.3%	243	46.1%	1.3%	16	3.0%	0.3%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	49,442	100.0%	97.3%	13,024	26.3%	97.6%	14,368	29.0%	97.7%	17,871	36.1%	96.7%	4,179	8.4%	98.5%
> 30 miles	793	100.0%	1.5%	103	12.9%	0.7%	284	35.8%	1.9%	362	45.6%	1.9%	44	5.5%	1.0%
Zip Invalid/Missing	527	100.0%	1.0%	215	40.7%	1.6%	53	10.0%	0.3%	243	46.1%	1.3%	16	3.0%	0.3%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	40,195	100.0%	79.1%	11,290	28.0%	84.6%	11,838	29.4%	80.5%	13,232	32.9%	71.6%	3,835	9.5%	90.4%
> 30 miles	10,040	100.0%	19.7%	1,837	18.2%	13.7%	2,814	28.0%	19.1%	5,001	49.8%	27.0%	388	3.8%	9.1%
Zip Invalid/Missing	527	100.0%	1.0%	215	40.7%	1.6%	53	10.0%	0.3%	243	46.1%	1.3%	16	3.0%	0.3%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	2,521	100.0%	4.9%	1,147	45.4%	8.5%	301	11.9%	2.0%	819	32.4%	4.4%	254	10.0%	5.9%
50-64 years	5,356	100.0%	10.5%	2,292	42.7%	17.1%	735	13.7%	4.9%	1,744	32.5%	9.4%	585	10.9%	13.8%
≥ 65 years	42,877	100.0%	84.4%	9,903	23.0%	74.2%	13,664	31.8%	92.9%	15,913	37.1%	86.1%	3,397	7.9%	80.1%
Invalid/Missing Age	8	100.0%	0.0%	0	0	0	5	62.5%	0.0%	0	0	0	3	37.5%	0.0%
GENDER ¹⁶															
Female	1,633	100.0%	3.2%	318	19.4%	2.3%	626	38.3%	4.2%	526	32.2%	2.8%	163	9.9%	3.8%
Male	49,129	100.0%	96.7%	13,024	26.5%	97.6%	14,079	28.6%	95.7%	17,950	36.5%	97.1%	4,076	8.2%	96.1%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	33,870	100.0%	66.7%	12,442	36.7%	93.2%	4,605	13.5%	31.3%	15,147	44.7%	81.9%	1,676	4.9%	39.5%
Low Priority	7,035	100.0%	13.8%	819	11.6%	6.1%	2,720	38.6%	18.4%	2,978	42.3%	16.1%	518	7.3%	12.2%
Priority Level Missing	9,857	100.0%	19.4%	81	0.8%	0.6%	7,380	74.8%	50.1%	351	3.5%	1.8%	2,045	20.7%	48.2%

Note: See attached footnotes for variable definitions and descriptions.

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Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 6 - The Mid-Atlantic Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	116,346	100.0%	100.0%	22,957	19.7%	100.0%	39,584	34.0%	100.0%	48,617	41.7%	100.0%	5,188	4.4%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	70,504	100.0%	60.5%	12,849	18.2%	55.9%	24,207	34.3%	61.1%	30,685	43.5%	63.1%	2,763	3.9%	53.2%
Urban	43,888	100.0%	37.7%	9,588	21.8%	41.7%	15,276	34.8%	38.5%	16,616	37.8%	34.1%	2,408	5.4%	46.4%
Zip Invalid/Missing	1,954	100.0%	1.6%	520	26.6%	2.2%	101	5.1%	0.2%	1,316	67.3%	2.7%	17	0.8%	0.3%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	85,455	100.0%	73.4%	17,978	21.0%	78.3%	28,818	33.7%	72.8%	34,681	40.5%	71.3%	3,978	4.6%	76.6%
> 30 miles	28,937	100.0%	24.8%	4,459	15.4%	19.4%	10,665	36.8%	26.9%	12,620	43.6%	25.9%	1,193	4.1%	22.9%
Zip Invalid/Missing	1,954	100.0%	1.6%	520	26.6%	2.2%	101	5.1%	0.2%	1,316	67.3%	2.7%	17	0.8%	0.3%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	55,906	100.0%	48.0%	13,725	24.5%	59.7%	17,609	31.4%	44.4%	21,801	38.9%	44.8%	2,771	4.9%	53.4%
> 30 miles	58,486	100.0%	50.2%	8,712	14.8%	37.9%	21,874	37.4%	55.2%	25,500	43.6%	52.4%	2,400	4.1%	46.2%
Zip Invalid/Missing	1,954	100.0%	1.6%	520	26.6%	2.2%	101	5.1%	0.2%	1,316	67.3%	2.7%	17	0.8%	0.3%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	7,166	100.0%	6.1%	2,720	37.9%	11.8%	1,123	15.6%	2.8%	2,768	38.6%	5.6%	555	7.7%	10.6%
50-64 years	16,704	100.0%	14.3%	5,789	34.6%	25.2%	2,965	17.7%	7.4%	6,858	41.0%	14.1%	1,092	6.5%	21.0%
≥ 65 years	92,466	100.0%	79.4%	14,448	15.6%	62.9%	35,488	38.3%	89.6%	38,990	42.1%	80.1%	3,540	3.8%	68.2%
Invalid/Missing Age	10	100.0%	0.0%	0	0	0	8	80.0%	0.0%	1	10.0%	0.0%	1	10.0%	0.0%
GENDER ¹⁶															
Female	3,933	100.0%	3.3%	633	16.0%	2.7%	1,672	42.5%	4.2%	1,358	34.5%	2.7%	270	6.8%	5.2%
Male	112,413	100.0%	96.6%	22,324	19.8%	97.2%	37,912	33.7%	95.7%	47,259	42.0%	97.2%	4,918	4.3%	94.7%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	78,479	100.0%	67.4%	21,492	27.3%	93.6%	13,049	16.6%	32.9%	41,480	52.8%	85.3%	2,458	3.1%	47.3%
Low Priority	18,167	100.0%	15.6%	1,313	7.2%	5.7%	9,600	52.8%	24.2%	6,428	35.3%	13.2%	826	4.5%	15.9%
Priority Level Missing	19,700	100.0%	16.9%	152	0.7%	0.6%	16,935	85.9%	42.7%	709	3.5%	1.4%	1,904	9.6%	36.7%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 7 - The Atlanta Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	130,577	100.0%	100.0%	26,162	20.0%	100.0%	39,909	30.5%	100.0%	58,611	44.8%	100.0%	5,895	4.5%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	74,093	100.0%	56.7%	13,794	18.6%	52.7%	22,888	30.8%	57.3%	34,379	46.3%	58.6%	3,032	4.0%	51.4%
Urban	54,512	100.0%	41.7%	11,770	21.5%	44.9%	16,893	30.9%	42.3%	23,016	42.2%	39.2%	2,833	5.1%	48.0%
Zip Invalid/Missing	1,972	100.0%	1.5%	598	30.3%	2.2%	128	6.4%	0.3%	1,216	61.6%	2.0%	30	1.5%	0.5%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	93,169	100.0%	71.3%	19,329	20.7%	73.8%	28,774	30.8%	72.0%	40,666	43.6%	69.3%	4,400	4.7%	74.6%
> 30 miles	35,436	100.0%	27.1%	6,235	17.5%	23.8%	11,007	31.0%	27.5%	16,729	47.2%	28.5%	1,465	4.1%	24.8%
Zip Invalid/Missing	1,972	100.0%	1.5%	598	30.3%	2.2%	128	6.4%	0.3%	1,216	61.6%	2.0%	30	1.5%	0.5%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	48,386	100.0%	37.0%	12,969	26.8%	49.5%	13,456	27.8%	33.7%	19,423	40.1%	33.1%	2,538	5.2%	43.0%
> 30 miles	80,219	100.0%	61.4%	12,595	15.7%	48.1%	26,325	32.8%	65.9%	37,972	47.3%	64.7%	3,327	4.1%	56.4%
Zip Invalid/Missing	1,972	100.0%	1.5%	598	30.3%	2.2%	128	6.4%	0.3%	1,216	61.6%	2.0%	30	1.5%	0.5%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	8,790	100.0%	6.7%	3,438	39.1%	13.1%	1,175	13.3%	2.9%	3,562	40.5%	6.0%	615	6.9%	10.4%
50-64 years	19,025	100.0%	14.5%	6,687	35.1%	25.5%	3,074	16.1%	7.7%	7,985	41.9%	13.6%	1,279	6.7%	21.6%
≥ 65 years	102,744	100.0%	78.6%	16,037	15.6%	61.2%	35,647	34.6%	89.3%	47,063	45.8%	80.2%	3,997	3.8%	67.8%
Invalid/Missing Age	18	100.0%	0.0%	0	0	0	13	72.2%	0.0%	1	5.5%	0.0%	4	22.2%	0.0%
GENDER ¹⁶															
Female	4,724	100.0%	3.6%	747	15.8%	2.8%	2,022	42.8%	5.0%	1,633	34.5%	2.7%	322	6.8%	5.4%
Male	125,853	100.0%	96.3%	25,415	20.1%	97.1%	37,887	30.1%	94.9%	56,978	45.2%	97.2%	5,573	4.4%	94.5%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	88,429	100.0%	67.7%	24,401	27.5%	93.2%	12,717	14.3%	31.8%	48,629	54.9%	82.9%	2,682	3.0%	45.4%
Low Priority	18,895	100.0%	14.4%	1,567	8.2%	5.9%	7,437	39.3%	18.6%	9,104	48.1%	15.5%	787	4.1%	13.3%
Priority Level Missing	23,253	100.0%	17.8%	194	0.8%	0.7%	19,755	84.9%	49.5%	878	3.7%	1.4%	2,426	10.4%	41.1%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 8 - VA Sunshine Healthcare Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	178,892	100.0%	100.0%	40,542	22.6%	100.0%	54,171	30.2%	100.0%	75,157	42.0%	100.0%	9,022	5.0%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	87,765	100.0%	49.0%	23,133	26.3%	57.0%	22,529	25.6%	41.5%	36,825	41.9%	48.9%	5,278	6.0%	58.5%
Urban	87,071	100.0%	48.6%	15,962	18.3%	39.3%	31,147	35.7%	57.4%	36,435	41.8%	48.4%	3,527	4.0%	39.0%
Zip Invalid/Missing	4,056	100.0%	2.2%	1,447	35.6%	3.5%	495	12.2%	0.9%	1,897	46.7%	2.5%	217	5.3%	2.4%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	164,047	100.0%	91.7%	36,872	22.4%	90.9%	50,570	30.8%	93.3%	68,220	41.5%	90.7%	8,385	5.1%	92.9%
> 30 miles	10,789	100.0%	6.0%	2,223	20.6%	5.4%	3,106	28.7%	5.7%	5,040	46.7%	6.7%	420	3.8%	4.6%
Zip Invalid/Missing	4,056	100.0%	2.2%	1,447	35.6%	3.5%	495	12.2%	0.9%	1,897	46.7%	2.5%	217	5.3%	2.4%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	85,737	100.0%	47.9%	21,824	25.4%	53.8%	24,698	28.8%	45.5%	34,315	40.0%	45.6%	4,900	5.7%	54.3%
> 30 miles	89,099	100.0%	49.8%	17,271	19.3%	42.6%	28,978	32.5%	53.4%	38,945	43.7%	51.8%	3,905	4.3%	43.2%
Zip Invalid/Missing	4,056	100.0%	2.2%	1,447	35.6%	3.5%	495	12.2%	0.9%	1,897	46.7%	2.5%	217	5.3%	2.4%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	9,790	100.0%	5.4%	4,721	48.2%	11.6%	1,036	10.5%	1.9%	3,236	33.0%	4.3%	797	8.1%	8.8%
50-64 years	22,705	100.0%	12.6%	10,336	45.5%	25.4%	2,953	13.0%	5.4%	7,547	33.2%	10.0%	1,869	8.2%	20.7%
≥ 65 years	146,382	100.0%	81.8%	25,484	17.4%	62.8%	50,169	34.2%	92.6%	64,373	43.9%	85.6%	6,356	4.3%	70.4%
Invalid/Missing Age	15	100.0%	0.0%	1	6.6%	0.0%	13	86.6%	0.0%	1	6.6%	0.0%	0	0	0
GENDER ¹⁶															
Female	8,002	100.0%	4.4%	1,224	15.2%	3.0%	3,354	41.9%	6.1%	2,797	34.9%	3.7%	627	7.8%	6.9%
Male	170,890	100.0%	95.5%	39,318	23.0%	96.9%	50,817	29.7%	93.8%	72,360	42.3%	96.2%	8,395	4.9%	93.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	121,868	100.0%	68.1%	38,521	31.6%	95.0%	17,545	14.3%	32.3%	61,199	50.2%	81.4%	4,603	3.7%	51.0%
Low Priority	29,493	100.0%	16.4%	1,628	5.5%	4.0%	14,183	48.0%	26.1%	12,586	42.6%	16.7%	1,096	3.7%	12.1%
Priority Level Missing	27,531	100.0%	15.3%	393	1.4%	0.9%	22,443	81.5%	41.4%	1,372	4.9%	1.8%	3,323	12.0%	36.8%

Note: See attached footnotes for variable definitions and descriptions.

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 9 - VA Mid South Healthcare Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	111,840	100.0%	100.0%	25,191	22.5%	100.0%	31,493	28.1%	100.0%	50,611	45.2%	100.0%	4,545	4.0%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	75,132	100.0%	67.1%	15,304	20.3%	60.7%	21,783	28.9%	69.1%	35,018	46.6%	69.1%	3,027	4.0%	66.6%
Urban	35,136	100.0%	31.4%	9,382	26.7%	37.2%	9,615	27.3%	30.5%	14,638	41.6%	28.9%	1,501	4.2%	33.0%
Zip Invalid/Missing	1,572	100.0%	1.4%	505	32.1%	2.0%	95	6.0%	0.3%	955	60.7%	1.8%	17	1.0%	0.3%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	76,384	100.0%	68.2%	18,585	24.3%	73.7%	20,768	27.1%	65.9%	33,890	44.3%	66.9%	3,141	4.1%	69.1%
> 30 miles	33,884	100.0%	30.2%	6,101	18.0%	24.2%	10,630	31.3%	33.7%	15,766	46.5%	31.1%	1,387	4.0%	30.5%
Zip Invalid/Missing	1,572	100.0%	1.4%	505	32.1%	2.0%	95	6.0%	0.3%	955	60.7%	1.8%	17	1.0%	0.3%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	43,779	100.0%	39.1%	12,780	29.1%	50.7%	10,792	24.6%	34.2%	18,420	42.0%	36.3%	1,787	4.0%	39.3%
> 30 miles	66,489	100.0%	59.4%	11,906	17.9%	47.2%	20,606	30.9%	65.4%	31,236	46.9%	61.7%	2,741	4.1%	60.3%
Zip Invalid/Missing	1,572	100.0%	1.4%	505	32.1%	2.0%	95	6.0%	0.3%	955	60.7%	1.8%	17	1.0%	0.3%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	7,167	100.0%	6.4%	2,666	37.1%	10.5%	1,095	15.2%	3.4%	2,913	40.6%	5.7%	493	6.8%	10.8%
50-64 years	17,327	100.0%	15.4%	6,265	36.1%	24.8%	2,725	15.7%	8.6%	7,403	42.7%	14.6%	934	5.3%	20.5%
≥ 65 years	87,335	100.0%	78.0%	16,259	18.6%	64.5%	27,664	31.6%	87.8%	40,294	46.1%	79.6%	3,118	3.5%	68.6%
Invalid/Missing Age	11	100.0%	0.0%	1	9.0%	0.0%	9	81.8%	0.0%	1	9.0%	0.0%	0	0	0
GENDER ¹⁶															
Female	2,966	100.0%	2.6%	456	15.3%	1.8%	1,287	43.3%	4.0%	976	32.9%	1.9%	247	8.3%	5.4%
Male	108,874	100.0%	97.3%	24,735	22.7%	98.1%	30,206	27.7%	95.9%	49,635	45.5%	98.0%	4,298	3.9%	94.5%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	82,041	100.0%	73.3%	23,577	28.7%	93.5%	12,875	15.6%	40.8%	43,280	52.7%	85.5%	2,309	2.8%	50.8%
Low Priority	13,653	100.0%	12.2%	1,468	10.7%	5.8%	4,880	35.7%	15.4%	6,786	49.7%	13.4%	519	3.8%	11.4%
Priority Level Missing	16,146	100.0%	14.4%	146	0.9%	0.5%	13,738	85.0%	43.6%	545	3.3%	1.0%	1,717	10.6%	37.7%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 10 - VA Healthcare System of Ohio

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	76,753	100.0%	100.0%	14,612	19.0%	100.0%	26,789	34.9%	100.0%	31,617	41.1%	100.0%	3,735	4.8%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	33,206	100.0%	43.2%	5,716	17.2%	39.1%	11,099	33.4%	41.4%	15,053	45.3%	47.6%	1,338	4.0%	35.8%
Urban	42,753	100.0%	55.7%	8,694	20.3%	59.4%	15,607	36.5%	58.2%	16,064	37.5%	50.8%	2,388	5.5%	63.9%
Zip Invalid/Missing	794	100.0%	1.0%	202	25.4%	1.3%	83	10.4%	0.3%	500	62.9%	1.5%	9	1.1%	0.2%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	72,415	100.0%	94.3%	13,782	19.0%	94.3%	25,450	35.1%	95.0%	29,598	40.8%	93.6%	3,585	4.9%	95.9%
> 30 miles	3,544	100.0%	4.6%	628	17.7%	4.2%	1,256	35.4%	4.6%	1,519	42.8%	4.8%	141	3.9%	3.7%
Zip Invalid/Missing	794	100.0%	1.0%	202	25.4%	1.3%	83	10.4%	0.3%	500	62.9%	1.5%	9	1.1%	0.2%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	38,047	100.0%	49.5%	8,652	22.7%	59.2%	13,877	36.4%	51.8%	13,283	34.9%	42.0%	2,235	5.8%	59.8%
> 30 miles	37,912	100.0%	49.3%	5,758	15.1%	39.4%	12,829	33.8%	47.8%	17,834	47.0%	56.4%	1,491	3.9%	39.9%
Zip Invalid/Missing	794	100.0%	1.0%	202	25.4%	1.3%	83	10.4%	0.3%	500	62.9%	1.5%	9	1.1%	0.2%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	4,726	100.0%	6.1%	1,902	40.2%	13.0%	631	13.3%	2.3%	1,779	37.6%	5.6%	414	8.7%	11.0%
50-64 years	9,712	100.0%	12.6%	3,505	36.0%	23.9%	1,676	17.2%	6.2%	3,747	38.5%	11.8%	784	8.0%	20.9%
≥ 65 years	62,308	100.0%	81.1%	9,205	14.7%	62.9%	24,478	39.2%	91.3%	26,088	41.8%	82.5%	2,537	4.0%	67.9%
Invalid/Missing Age	7	100.0%	0.0%	0	0	0	4	57.1%	0.0%	3	42.8%	0.0%	0	0	0
GENDER ¹⁶															
Female	2,125	100.0%	2.7%	400	18.8%	2.7%	807	37.9%	3.0%	749	35.2%	2.3%	169	7.9%	4.5%
Male	74,628	100.0%	97.2%	14,212	19.0%	97.2%	25,982	34.8%	96.9%	30,868	41.3%	97.6%	3,566	4.7%	95.4%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	52,704	100.0%	68.6%	13,613	25.8%	93.1%	10,996	20.8%	41.0%	26,207	49.7%	82.8%	1,888	3.5%	50.5%
Low Priority	11,559	100.0%	15.0%	908	7.8%	6.2%	4,987	43.1%	18.6%	5,109	44.1%	16.1%	555	4.8%	14.8%
Priority Level Missing	12,490	100.0%	16.2%	91	0.7%	0.6%	10,806	86.5%	40.3%	301	2.4%	0.9%	1,292	10.3%	34.5%

Note: See attached footnotes for variable definitions and descriptions.
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Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 11 - Veterans In Partnership

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	106,781	100.0%	100.0%	19,703	18.4%	100.0%	34,834	32.6%	100.0%	47,922	44.8%	100.0%	4,322	4.0%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	51,262	100.0%	48.0%	8,901	17.3%	45.1%	16,151	31.5%	46.3%	24,468	47.7%	51.0%	1,742	3.3%	40.3%
Urban	54,820	100.0%	51.3%	10,592	19.3%	53.7%	18,602	33.9%	53.4%	23,058	42.0%	48.1%	2,568	4.6%	59.4%
Zip Invalid/Missing	699	100.0%	0.6%	210	30.0%	1.0%	81	11.5%	0.2%	396	56.6%	0.8%	12	1.7%	0.2%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	87,681	100.0%	82.1%	16,654	18.9%	84.5%	28,513	32.5%	81.8%	38,826	44.2%	81.0%	3,688	4.2%	85.3%
> 30 miles	18,401	100.0%	17.2%	2,839	15.4%	14.4%	6,240	33.9%	17.9%	8,700	47.2%	18.1%	622	3.3%	14.3%
Zip Invalid/Missing	699	100.0%	0.6%	210	30.0%	1.0%	81	11.5%	0.2%	396	56.6%	0.8%	12	1.7%	0.2%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	48,543	100.0%	45.4%	11,300	23.2%	57.3%	15,444	31.8%	44.3%	19,479	40.1%	40.6%	2,320	4.7%	53.6%
> 30 miles	57,539	100.0%	53.8%	8,193	14.2%	41.5%	19,309	33.5%	55.4%	28,047	48.7%	58.5%	1,990	3.4%	46.0%
Zip Invalid/Missing	699	100.0%	0.6%	210	30.0%	1.0%	81	11.5%	0.2%	396	56.6%	0.8%	12	1.7%	0.2%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	6,505	100.0%	6.0%	2,367	36.3%	12.0%	1,033	15.8%	2.9%	2,580	39.6%	5.3%	525	8.0%	12.1%
50-64 years	13,041	100.0%	12.2%	4,532	34.7%	23.0%	2,272	17.4%	6.5%	5,289	40.5%	11.0%	948	7.2%	21.9%
≥ 65 years	87,220	100.0%	81.6%	12,803	14.6%	64.9%	31,516	36.1%	90.4%	40,053	45.9%	83.5%	2,848	3.2%	65.8%
Invalid/Missing Age	15	100.0%	0.0%	1	6.6%	0.0%	13	86.6%	0.0%	0	0	0	1	6.6%	0.0%
GENDER ¹⁶															
Female	3,219	100.0%	3.0%	511	15.8%	2.5%	1,247	38.7%	3.5%	1,261	39.1%	2.6%	200	6.2%	4.6%
Male	103,562	100.0%	96.9%	19,192	18.5%	97.4%	33,587	32.4%	96.4%	46,661	45.0%	97.3%	4,122	3.9%	95.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	68,249	100.0%	63.9%	18,094	26.5%	91.8%	11,003	16.1%	31.5%	37,073	54.3%	77.3%	2,079	3.0%	48.1%
Low Priority	19,432	100.0%	18.1%	1,448	7.4%	7.3%	7,262	37.3%	20.8%	10,078	51.8%	21.0%	644	3.3%	14.9%
Priority Level Missing	19,100	100.0%	17.8%	161	0.8%	0.8%	16,569	86.7%	47.5%	771	4.0%	1.6%	1,599	8.3%	36.9%

Note: See attached footnotes for variable definitions and descriptions.

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 12 - The Great Lakes Health Care System

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	105,470	100.0%	100.0%	22,481	21.3%	100.0%	33,083	31.3%	100.0%	44,925	42.5%	100.0%	4,981	4.7%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	37,359	100.0%	35.4%	6,475	17.3%	28.8%	11,363	30.4%	34.3%	18,235	48.8%	40.5%	1,286	3.4%	25.8%
Urban	67,390	100.0%	63.8%	15,758	23.3%	70.0%	21,612	32.0%	65.3%	26,341	39.0%	58.6%	3,679	5.4%	73.8%
Zip Invalid/Missing	721	100.0%	0.6%	248	34.3%	1.1%	108	14.9%	0.3%	349	48.4%	0.7%	16	2.2%	0.3%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	96,529	100.0%	91.5%	20,808	21.5%	92.5%	30,618	31.7%	92.5%	40,387	41.8%	89.8%	4,716	4.8%	94.6%
> 30 miles	8,220	100.0%	7.7%	1,425	17.3%	6.3%	2,357	28.6%	7.1%	4,189	50.9%	9.3%	249	3.0%	4.9%
Zip Invalid/Missing	721	100.0%	0.6%	248	34.3%	1.1%	108	14.9%	0.3%	349	48.4%	0.7%	16	2.2%	0.3%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	66,033	100.0%	62.6%	16,583	25.1%	73.7%	20,838	31.5%	62.9%	24,878	37.6%	55.3%	3,734	5.6%	74.9%
> 30 miles	38,716	100.0%	36.7%	5,650	14.5%	25.1%	12,137	31.3%	36.6%	19,698	50.8%	43.8%	1,231	3.1%	24.7%
Zip Invalid/Missing	721	100.0%	0.6%	248	34.3%	1.1%	108	14.9%	0.3%	349	48.4%	0.7%	16	2.2%	0.3%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	4,906	100.0%	4.6%	2,043	41.6%	9.0%	686	13.9%	2.0%	1,754	35.7%	3.9%	423	8.6%	8.4%
50-64 years	10,678	100.0%	10.1%	4,348	40.7%	19.3%	1,589	14.8%	4.8%	3,828	35.8%	8.5%	913	8.5%	18.3%
≥ 65 years	89,876	100.0%	85.2%	16,089	17.9%	71.5%	30,804	34.2%	93.1%	39,341	43.7%	87.5%	3,642	4.0%	73.1%
Invalid/Missing Age	10	100.0%	0.0%	1	10.0%	0.0%	4	40.0%	0.0%	2	20.0%	0.0%	3	30.0%	0.0%
GENDER ¹⁶															
Female	3,671	100.0%	3.4%	552	15.0%	2.4%	1,508	41.0%	4.5%	1,399	38.1%	3.1%	212	5.7%	4.2%
Male	101,799	100.0%	96.5%	21,929	21.5%	97.5%	31,575	31.0%	95.4%	43,526	42.7%	96.8%	4,769	4.6%	95.7%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	67,778	100.0%	64.2%	20,248	29.8%	90.0%	12,058	17.7%	36.4%	33,034	48.7%	73.5%	2,438	3.5%	48.9%
Low Priority	24,932	100.0%	23.6%	2,059	8.2%	9.1%	10,678	42.8%	32.2%	11,006	44.1%	24.4%	1,189	4.7%	23.8%
Priority Level Missing	12,760	100.0%	12.0%	174	1.3%	0.7%	10,347	81.0%	31.2%	885	6.9%	1.9%	1,354	10.6%	27.1%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 13 - VA Upper Midwest Health Care Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	73,732	100.0%	100.0%	15,637	21.2%	100.0%	20,858	28.2%	100.0%	34,498	46.7%	100.0%	2,739	3.7%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	48,108	100.0%	65.2%	9,129	18.9%	58.3%	13,739	28.5%	65.8%	23,554	48.9%	68.2%	1,686	3.5%	61.5%
Urban	24,172	100.0%	32.7%	5,996	24.8%	38.3%	7,062	29.2%	33.8%	10,077	41.6%	29.2%	1,037	4.2%	37.8%
Zip Invalid/Missing	1,452	100.0%	1.9%	512	35.2%	3.2%	57	3.9%	0.2%	867	59.7%	2.5%	16	1.1%	0.5%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	45,032	100.0%	61.0%	10,741	23.8%	68.6%	12,399	27.5%	59.4%	20,098	44.6%	58.2%	1,794	3.9%	65.4%
> 30 miles	27,248	100.0%	36.9%	4,384	16.0%	28.0%	8,402	30.8%	40.2%	13,533	49.6%	39.2%	929	3.4%	33.9%
Zip Invalid/Missing	1,452	100.0%	1.9%	512	35.2%	3.2%	57	3.9%	0.2%	867	59.7%	2.5%	16	1.1%	0.5%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	26,399	100.0%	35.8%	7,724	29.2%	49.3%	6,691	25.3%	32.0%	10,881	41.2%	31.5%	1,103	4.1%	40.2%
> 30 miles	45,881	100.0%	62.2%	7,401	16.1%	47.3%	14,110	30.7%	67.6%	22,750	49.5%	65.9%	1,620	3.5%	59.1%
Zip Invalid/Missing	1,452	100.0%	1.9%	512	35.2%	3.2%	57	3.9%	0.2%	867	59.7%	2.5%	16	1.1%	0.5%
AGE AS OF 01/01/1999 ^{15 15}															
< 50 years	3,112	100.0%	4.2%	1,418	45.5%	9.0%	373	11.9%	1.7%	1,122	36.0%	3.2%	199	6.3%	7.2%
50-64 years	7,328	100.0%	9.9%	3,097	42.2%	19.8%	1,027	14.0%	4.9%	2,726	37.1%	7.9%	478	6.5%	17.4%
≥ 65 years	63,281	100.0%	85.8%	11,120	17.5%	71.1%	19,453	30.7%	93.2%	30,646	48.4%	88.8%	2,062	3.2%	75.2%
Invalid/Missing Age	11	100.0%	0.0%	2	18.1%	0.0%	5	45.4%	0.0%	4	36.3%	0.0%	0	0	0
GENDER ¹⁶															
Female	6,761	100.0%	9.1%	1,170	17.3%	7.4%	2,272	33.6%	10.8%	2,849	42.1%	8.2%	470	6.9%	17.1%
Male	66,971	100.0%	90.8%	14,467	21.6%	92.5%	18,586	27.7%	89.1%	31,649	47.2%	91.7%	2,269	3.3%	82.8%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	42,893	100.0%	58.1%	13,272	30.9%	84.8%	5,286	12.3%	25.3%	23,266	54.2%	67.4%	1,069	2.4%	39.0%
Low Priority	17,338	100.0%	23.5%	1,463	8.4%	9.3%	6,864	39.5%	32.9%	8,449	48.7%	24.4%	562	3.2%	20.5%
Priority Level Missing	13,501	100.0%	18.3%	902	6.6%	5.7%	8,708	64.4%	41.7%	2,783	20.6%	8.0%	1,108	8.2%	40.4%

Note: See attached footnotes for variable definitions and descriptions.

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Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 14 - Central Plains Health Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	55,324	100.0%	100.0%	8,643	15.6%	100.0%	16,031	28.9%	100.0%	29,059	52.5%	100.0%	1,591	2.8%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	39,811	100.0%	71.9%	5,197	13.0%	60.1%	11,562	29.0%	72.1%	22,024	55.3%	75.7%	1,028	2.5%	64.6%
Urban	15,120	100.0%	27.3%	3,349	22.1%	38.7%	4,435	29.3%	27.6%	6,778	44.8%	23.3%	558	3.6%	35.0%
Zip Invalid/Missing	393	100.0%	0.7%	97	24.6%	1.1%	34	8.6%	0.2%	257	65.3%	0.8%	5	1.2%	0.3%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	36,502	100.0%	65.9%	6,298	17.2%	72.8%	10,643	29.1%	66.3%	18,435	50.5%	63.4%	1,126	3.0%	70.7%
> 30 miles	18,429	100.0%	33.3%	2,248	12.1%	26.0%	5,354	29.0%	33.3%	10,367	56.2%	35.6%	460	2.4%	28.9%
Zip Invalid/Missing	393	100.0%	0.7%	97	24.6%	1.1%	34	8.6%	0.2%	257	65.3%	0.8%	5	1.2%	0.3%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	14,010	100.0%	25.3%	3,417	24.3%	39.5%	4,053	28.9%	25.2%	5,982	42.6%	20.5%	558	3.9%	35.0%
> 30 miles	40,921	100.0%	73.9%	5,129	12.5%	59.3%	11,944	29.1%	74.5%	22,820	55.7%	78.5%	1,028	2.5%	64.6%
Zip Invalid/Missing	393	100.0%	0.7%	97	24.6%	1.1%	34	8.6%	0.2%	257	65.3%	0.8%	5	1.2%	0.3%
AGE AS OF 01/01/1999 ^{15 15}															
< 50 years	2,040	100.0%	3.6%	803	39.3%	9.2%	263	12.8%	1.6%	865	42.4%	2.9%	109	5.3%	6.8%
50-64 years	5,145	100.0%	9.2%	1,929	37.4%	22.3%	736	14.3%	4.5%	2,161	42.0%	7.4%	319	6.2%	20.0%
≥ 65 years	48,132	100.0%	87.0%	5,911	12.2%	68.3%	15,027	31.2%	93.7%	26,033	54.0%	89.5%	1,161	2.4%	72.9%
Invalid/Missing Age	7	100.0%	0.0%	0	0	0	5	71.4%	0.0%	0	0	0	2	28.5%	0.1%
GENDER ¹⁶															
Female	1,977	100.0%	3.5%	208	10.5%	2.4%	901	45.5%	5.6%	724	36.6%	2.4%	144	7.2%	9.0%
Male	53,347	100.0%	96.4%	8,435	15.8%	97.5%	15,130	28.3%	94.3%	28,335	53.1%	97.5%	1,447	2.7%	90.9%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	32,338	100.0%	58.4%	7,840	24.2%	90.7%	4,254	13.1%	26.5%	19,559	60.4%	67.3%	685	2.1%	43.0%
Low Priority	16,802	100.0%	30.3%	724	4.3%	8.3%	6,538	38.9%	40.7%	9,112	54.2%	31.3%	428	2.5%	26.9%
Priority Level Missing	6,184	100.0%	11.1%	79	1.2%	0.9%	5,239	84.7%	32.6%	388	6.2%	1.3%	478	7.7%	30.0%

Note: See attached footnotes for variable definitions and descriptions.
VIREC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 15 - VA Heartland Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE												
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹			
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	
*** TOTAL VETERANS ***	97,330	100.0%	100.0%	23,071	23.7%	100.0%	24,145	24.8%	100.0%	46,926	48.2%	100.0%	3,188	3.2%	100.0%	
TYPE OF ZIP CODE ¹³																
Rural	66,922	100.0%	68.7%	13,890	20.7%	60.2%	16,747	25.0%	69.3%	34,312	51.2%	73.1%	1,973	2.9%	61.8%	
Urban	29,628	100.0%	30.4%	8,934	30.1%	38.7%	7,357	24.8%	30.4%	12,128	40.9%	25.8%	1,209	4.0%	37.9%	
Zip Invalid/Missing	780	100.0%	0.8%	247	31.6%	1.0%	41	5.2%	0.1%	486	62.3%	1.0%	6	0.7%	0.1%	
OUTPATIENT DISTANCE ¹⁴																
≤ 30 miles	69,342	100.0%	71.2%	17,673	25.4%	76.6%	16,635	23.9%	68.8%	32,680	47.1%	69.6%	2,354	3.3%	73.8%	
> 30 miles	27,208	100.0%	27.9%	5,151	18.9%	22.3%	7,469	27.4%	30.9%	13,760	50.5%	29.3%	828	3.0%	25.9%	
Zip Invalid/Missing	780	100.0%	0.8%	247	31.6%	1.0%	41	5.2%	0.1%	486	62.3%	1.0%	6	0.7%	0.1%	
INPATIENT DISTANCE ¹⁴																
≤ 30 miles	40,739	100.0%	41.8%	12,728	31.2%	55.1%	9,719	23.8%	40.2%	16,650	40.8%	35.4%	1,642	4.0%	51.5%	
> 30 miles	55,811	100.0%	57.3%	10,096	18.0%	43.7%	14,385	25.7%	59.5%	29,790	53.3%	63.4%	1,540	2.7%	48.3%	
Zip Invalid/Missing	780	100.0%	0.8%	247	31.6%	1.0%	41	5.2%	0.1%	486	62.3%	1.0%	6	0.7%	0.1%	
AGE AS OF 01/01/1999 ^{15 15}																
< 50 years	5,539	100.0%	5.6%	2,501	45.1%	10.8%	601	10.8%	2.4%	2,079	37.5%	4.4%	358	6.4%	11.2%	
50-64 years	12,962	100.0%	13.3%	5,485	42.3%	23.7%	1,581	12.1%	6.5%	5,214	40.2%	11.1%	682	5.2%	21.3%	
≥ 65 years	78,823	100.0%	80.9%	15,085	19.1%	65.3%	21,959	27.8%	90.9%	39,632	50.2%	84.4%	2,147	2.7%	67.3%	
Invalid/Missing Age	6	100.0%	0.0%	0	0	0	4	66.6%	0.0%	1	16.6%	0.0%	1	16.6%	0.0%	
GENDER ¹⁶																
Female	2,302	100.0%	2.3%	507	22.0%	2.1%	767	33.3%	3.1%	911	39.5%	1.9%	117	5.0%	3.6%	
Male	95,028	100.0%	97.6%	22,564	23.7%	97.8%	23,378	24.6%	96.8%	46,015	48.4%	98.0%	3,071	3.2%	96.3%	
CONSTRUCTED PRIORITY LEVEL ¹⁷																
High Priority	67,948	100.0%	69.8%	21,535	31.6%	93.3%	7,859	11.5%	32.5%	36,952	54.3%	78.7%	1,602	2.3%	50.2%	
Low Priority	17,861	100.0%	18.3%	1,462	8.1%	6.3%	6,263	35.0%	25.9%	9,593	53.7%	20.4%	543	3.0%	17.0%	
Priority Level Missing	11,521	100.0%	11.8%	74	0.6%	0.3%	10,023	86.9%	41.5%	381	3.3%	0.8%	1,043	9.0%	32.7%	

Note: See attached footnotes for variable definitions and descriptions.
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Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 16 - South Central VA Healthcare Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	180,094	100.0%	100.0%	43,812	24.3%	100.0%	48,497	26.9%	100.0%	79,264	44.0%	100.0%	8,521	4.7%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	109,720	100.0%	60.9%	24,550	22.3%	56.0%	29,088	26.5%	59.9%	51,506	46.9%	64.9%	4,576	4.1%	53.7%
Urban	68,294	100.0%	37.9%	18,628	27.2%	42.5%	19,332	28.3%	39.8%	26,419	38.6%	33.3%	3,915	5.7%	45.9%
Zip Invalid/Missing	2,080	100.0%	1.1%	634	30.4%	1.4%	77	3.7%	0.1%	1,339	64.3%	1.6%	30	1.4%	0.3%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	114,904	100.0%	63.8%	30,258	26.3%	69.0%	30,371	26.4%	62.6%	48,559	42.2%	61.2%	5,716	4.9%	67.0%
> 30 miles	63,110	100.0%	35.0%	12,920	20.4%	29.4%	18,049	28.5%	37.2%	29,366	46.5%	37.0%	2,775	4.3%	32.5%
Zip Invalid/Missing	2,080	100.0%	1.1%	634	30.4%	1.4%	77	3.7%	0.1%	1,339	64.3%	1.6%	30	1.4%	0.3%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	59,473	100.0%	33.0%	19,800	33.2%	45.1%	14,050	23.6%	28.9%	22,318	37.5%	28.1%	3,305	5.5%	38.7%
> 30 miles	118,541	100.0%	65.8%	23,378	19.7%	53.3%	34,370	28.9%	70.8%	55,607	46.9%	70.1%	5,186	4.3%	60.8%
Zip Invalid/Missing	2,080	100.0%	1.1%	634	30.4%	1.4%	77	3.7%	0.1%	1,339	64.3%	1.6%	30	1.4%	0.3%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	10,579	100.0%	5.8%	4,336	40.9%	9.8%	1,351	12.7%	2.7%	4,110	38.8%	5.1%	782	7.3%	9.1%
50-64 years	26,549	100.0%	14.7%	10,634	40.0%	24.2%	3,537	13.3%	7.2%	10,712	40.3%	13.5%	1,666	6.2%	19.5%
≥ 65 years	142,943	100.0%	79.3%	28,838	20.1%	65.8%	43,594	30.4%	89.8%	64,438	45.0%	81.2%	6,073	4.2%	71.2%
Invalid/Missing Age	23	100.0%	0.0%	4	17.3%	0.0%	15	65.2%	0.0%	4	17.3%	0.0%	0	0	0
GENDER ¹⁶															
Female	4,938	100.0%	2.7%	917	18.5%	2.0%	1,913	38.7%	3.9%	1,773	35.9%	2.2%	335	6.7%	3.9%
Male	175,156	100.0%	97.2%	42,895	24.4%	97.9%	46,584	26.5%	96.0%	77,491	44.2%	97.7%	8,186	4.6%	96.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	134,637	100.0%	74.7%	41,710	30.9%	95.2%	18,606	13.8%	38.3%	69,965	51.9%	88.2%	4,356	3.2%	51.1%
Low Priority	18,122	100.0%	10.0%	1,887	10.4%	4.3%	6,953	38.3%	14.3%	8,335	45.9%	10.5%	947	5.2%	11.1%
Priority Level Missing	27,335	100.0%	15.1%	215	0.7%	0.4%	22,938	83.9%	47.2%	964	3.5%	1.2%	3,218	11.7%	37.7%

Note: See attached footnotes for variable definitions and descriptions.
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Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 17 - VA Heart of Texas Health Care Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	78,671	100.0%	100.0%	20,554	26.1%	100.0%	20,957	26.6%	100.0%	32,382	41.1%	100.0%	4,778	6.0%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	40,903	100.0%	51.9%	10,135	24.7%	49.3%	10,492	25.6%	50.0%	18,312	44.7%	56.5%	1,964	4.8%	41.1%
Urban	37,002	100.0%	47.0%	10,150	27.4%	49.3%	10,394	28.0%	49.5%	13,668	36.9%	42.2%	2,790	7.5%	58.3%
Zip Invalid/Missing	766	100.0%	0.9%	269	35.1%	1.3%	71	9.2%	0.3%	402	52.4%	1.2%	24	3.1%	0.5%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	70,037	100.0%	89.0%	18,339	26.1%	89.2%	18,845	26.9%	89.9%	28,488	40.6%	87.9%	4,365	6.2%	91.3%
> 30 miles	7,868	100.0%	10.0%	1,946	24.7%	9.4%	2,041	25.9%	9.7%	3,492	44.3%	10.7%	389	4.9%	8.1%
Zip Invalid/Missing	766	100.0%	0.9%	269	35.1%	1.3%	71	9.2%	0.3%	402	52.4%	1.2%	24	3.1%	0.5%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	33,639	100.0%	42.7%	10,399	30.9%	50.5%	8,780	26.1%	41.8%	11,877	35.3%	36.6%	2,583	7.6%	54.0%
> 30 miles	44,266	100.0%	56.2%	9,886	22.3%	48.0%	12,106	27.3%	57.7%	20,103	45.4%	62.0%	2,171	4.9%	45.4%
Zip Invalid/Missing	766	100.0%	0.9%	269	35.1%	1.3%	71	9.2%	0.3%	402	52.4%	1.2%	24	3.1%	0.5%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	4,225	100.0%	5.3%	1,939	45.8%	9.4%	539	12.7%	2.5%	1,326	31.3%	4.0%	421	9.9%	8.8%
50-64 years	10,226	100.0%	12.9%	4,537	44.3%	22.0%	1,354	13.2%	6.4%	3,397	33.2%	10.4%	938	9.1%	19.6%
≥ 65 years	64,216	100.0%	81.6%	14,076	21.9%	68.4%	19,063	29.6%	90.9%	27,658	43.0%	85.4%	3,419	5.3%	71.5%
Invalid/Missing Age	4	100.0%	0.0%	2	50.0%	0.0%	1	25.0%	0.0%	1	25.0%	0.0%	0	0	0
GENDER ¹⁶															
Female	3,081	100.0%	3.9%	586	19.0%	2.8%	1,227	39.8%	5.8%	984	31.9%	3.0%	284	9.2%	5.9%
Male	75,590	100.0%	96.0%	19,968	26.4%	97.1%	19,730	26.1%	94.1%	31,398	41.5%	96.9%	4,494	5.9%	94.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	57,663	100.0%	73.2%	19,419	33.6%	94.4%	7,980	13.8%	38.0%	27,840	48.2%	85.9%	2,424	4.2%	50.7%
Low Priority	9,066	100.0%	11.5%	927	10.2%	4.5%	3,667	40.4%	17.4%	3,876	42.7%	11.9%	596	6.5%	12.4%
Priority Level Missing	11,942	100.0%	15.1%	208	1.7%	1.0%	9,310	77.9%	44.4%	666	5.5%	2.0%	1,758	14.7%	36.7%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 18 - VA Southwest Health Care Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	86,921	100.0%	100.0%	24,782	28.5%	100.0%	20,119	23.1%	100.0%	37,424	43.0%	100.0%	4,596	5.2%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	44,248	100.0%	50.9%	11,711	26.4%	47.2%	9,815	22.1%	48.7%	20,553	46.4%	54.9%	2,169	4.9%	47.1%
Urban	41,539	100.0%	47.7%	12,635	30.4%	50.9%	10,244	24.6%	50.9%	16,250	39.1%	43.4%	2,410	5.8%	52.4%
Zip Invalid/Missing	1,134	100.0%	1.3%	436	38.4%	1.7%	60	5.2%	0.2%	621	54.7%	1.6%	17	1.4%	0.3%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	67,050	100.0%	77.1%	19,653	29.3%	79.3%	16,024	23.8%	79.6%	27,675	41.2%	73.9%	3,698	5.5%	80.4%
> 30 miles	18,737	100.0%	21.5%	4,693	25.0%	18.9%	4,035	21.5%	20.0%	9,128	48.7%	24.3%	881	4.7%	19.1%
Zip Invalid/Missing	1,134	100.0%	1.3%	436	38.4%	1.7%	60	5.2%	0.2%	621	54.7%	1.6%	17	1.4%	0.3%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	36,638	100.0%	42.1%	12,429	33.9%	50.1%	8,975	24.4%	44.6%	13,096	35.7%	34.9%	2,138	5.8%	46.5%
> 30 miles	49,149	100.0%	56.5%	11,917	24.2%	48.0%	11,084	22.5%	55.0%	23,707	48.2%	63.3%	2,441	4.9%	53.1%
Zip Invalid/Missing	1,134	100.0%	1.3%	436	38.4%	1.7%	60	5.2%	0.2%	621	54.7%	1.6%	17	1.4%	0.3%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	4,581	100.0%	5.2%	2,257	49.2%	9.1%	479	10.4%	2.3%	1,444	31.5%	3.8%	401	8.7%	8.7%
50-64 years	11,354	100.0%	13.0%	5,485	48.3%	22.1%	1,252	11.0%	6.2%	3,712	32.6%	9.9%	905	7.9%	19.6%
≥ 65 years	70,979	100.0%	81.6%	17,040	24.0%	68.7%	18,385	25.9%	91.3%	32,266	45.4%	86.2%	3,288	4.6%	71.5%
Invalid/Missing Age	7	100.0%	0.0%	0	0	0	3	42.8%	0.0%	2	28.5%	0.0%	2	28.5%	0.0%
GENDER ¹⁶															
Female	5,819	100.0%	6.6%	1,160	19.9%	4.6%	2,045	35.1%	10.1%	1,987	34.1%	5.3%	627	10.7%	13.6%
Male	81,102	100.0%	93.3%	23,622	29.1%	95.3%	18,074	22.2%	89.8%	35,437	43.6%	94.6%	3,969	4.8%	86.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	60,530	100.0%	69.6%	22,583	37.3%	91.1%	6,720	11.1%	33.4%	29,072	48.0%	77.6%	2,155	3.5%	46.8%
Low Priority	14,289	100.0%	16.4%	1,668	11.6%	6.7%	4,938	34.5%	24.5%	6,974	48.8%	18.6%	709	4.9%	15.4%
Priority Level Missing	12,102	100.0%	13.9%	531	4.3%	2.1%	8,461	69.9%	42.0%	1,378	11.3%	3.6%	1,732	14.3%	37.6%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 19 - Rocky Mountain Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	59,872	100.0%	100.0%	13,696	22.8%	100.0%	16,449	27.4%	100.0%	26,808	44.7%	100.0%	2,919	4.8%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	31,054	100.0%	51.8%	5,895	18.9%	43.0%	8,685	27.9%	52.7%	15,176	48.8%	56.6%	1,298	4.1%	44.4%
Urban	26,820	100.0%	44.7%	7,078	26.3%	51.6%	7,736	28.8%	47.0%	10,390	38.7%	38.7%	1,616	6.0%	55.3%
Zip Invalid/Missing	1,998	100.0%	3.3%	723	36.1%	5.2%	28	1.4%	0.1%	1,242	62.1%	4.6%	5	0.2%	0.1%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	43,178	100.0%	72.1%	10,605	24.5%	77.4%	11,969	27.7%	72.7%	18,337	42.4%	68.4%	2,267	5.2%	77.6%
> 30 miles	14,696	100.0%	24.5%	2,368	16.1%	17.2%	4,452	30.2%	27.0%	7,229	49.1%	26.9%	647	4.4%	22.1%
Zip Invalid/Missing	1,998	100.0%	3.3%	723	36.1%	5.2%	28	1.4%	0.1%	1,242	62.1%	4.6%	5	0.2%	0.1%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	21,385	100.0%	35.7%	6,808	31.8%	49.7%	5,463	25.5%	33.2%	7,881	36.8%	29.3%	1,233	5.7%	42.2%
> 30 miles	36,489	100.0%	60.9%	6,165	16.8%	45.0%	10,958	30.0%	66.6%	17,685	48.4%	65.9%	1,681	4.6%	57.5%
Zip Invalid/Missing	1,998	100.0%	3.3%	723	36.1%	5.2%	28	1.4%	0.1%	1,242	62.1%	4.6%	5	0.2%	0.1%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	3,615	100.0%	6.0%	1,613	44.6%	11.7%	438	12.1%	2.6%	1,248	34.5%	4.6%	316	8.7%	10.8%
50-64 years	7,842	100.0%	13.0%	3,323	42.3%	24.2%	1,097	13.9%	6.6%	2,787	35.5%	10.3%	635	8.0%	21.7%
≥ 65 years	48,406	100.0%	80.8%	8,760	18.0%	63.9%	14,907	30.7%	90.6%	22,773	47.0%	84.9%	1,966	4.0%	67.3%
Invalid/Missing Age	9	100.0%	0.0%	0	0	0	7	77.7%	0.0%	0	0	0	2	22.2%	0.0%
GENDER ¹⁶															
Female	2,169	100.0%	3.6%	398	18.3%	2.9%	803	37.0%	4.8%	793	36.5%	2.9%	175	8.0%	5.9%
Male	57,703	100.0%	96.3%	13,298	23.0%	97.0%	15,646	27.1%	95.1%	26,015	45.0%	97.0%	2,744	4.7%	94.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	39,696	100.0%	66.3%	12,566	31.6%	91.7%	5,275	13.2%	32.0%	20,495	51.6%	76.4%	1,360	3.4%	46.5%
Low Priority	12,371	100.0%	20.6%	1,060	8.5%	7.7%	4,726	38.2%	28.7%	6,042	48.8%	22.5%	543	4.3%	18.6%
Priority Level Missing	7,805	100.0%	13.0%	70	0.8%	0.5%	6,448	82.6%	39.1%	271	3.4%	1.0%	1,016	13.0%	34.8%

Note: See attached footnotes for variable definitions and descriptions.

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Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 20 - Northwest Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	73,212	100.0%	100.0%	21,052	28.7%	100.0%	20,013	27.3%	100.0%	27,695	37.8%	100.0%	4,452	6.0%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	42,288	100.0%	57.7%	11,108	26.2%	52.7%	11,593	27.4%	57.9%	17,498	41.3%	63.1%	2,089	4.9%	46.9%
Urban	30,508	100.0%	41.6%	9,817	32.1%	46.6%	8,367	27.4%	41.8%	9,989	32.7%	36.0%	2,335	7.6%	52.4%
Zip Invalid/Missing	416	100.0%	0.5%	127	30.5%	0.6%	53	12.7%	0.2%	208	50.0%	0.7%	28	6.7%	0.6%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	52,517	100.0%	71.7%	16,363	31.1%	77.7%	13,914	26.4%	69.5%	18,837	35.8%	68.0%	3,403	6.4%	76.4%
> 30 miles	20,279	100.0%	27.6%	4,562	22.4%	21.6%	6,046	29.8%	30.2%	8,650	42.6%	31.2%	1,021	5.0%	22.9%
Zip Invalid/Missing	416	100.0%	0.5%	127	30.5%	0.6%	53	12.7%	0.2%	208	50.0%	0.7%	28	6.7%	0.6%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	32,802	100.0%	44.8%	11,751	35.8%	55.8%	8,026	24.4%	40.1%	10,735	32.7%	38.7%	2,290	6.9%	51.4%
> 30 miles	39,994	100.0%	54.6%	9,174	22.9%	43.5%	11,934	29.8%	59.6%	16,752	41.8%	60.4%	2,134	5.3%	47.9%
Zip Invalid/Missing	416	100.0%	0.5%	127	30.5%	0.6%	53	12.7%	0.2%	208	50.0%	0.7%	28	6.7%	0.6%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	5,525	100.0%	7.5%	2,487	45.0%	11.8%	751	13.5%	3.7%	1,862	33.7%	6.7%	425	7.6%	9.5%
50-64 years	11,802	100.0%	16.1%	5,453	46.2%	25.9%	1,572	13.3%	7.8%	3,772	31.9%	13.6%	1,005	8.5%	22.5%
≥ 65 years	55,877	100.0%	76.3%	13,112	23.4%	62.2%	17,684	31.6%	88.3%	22,061	39.4%	79.6%	3,020	5.4%	67.8%
Invalid/Missing Age	8	100.0%	0.0%	0	0	0	6	75.0%	0.0%	0	0	0	2	25.0%	0.0%
GENDER ¹⁶															
Female	3,714	100.0%	5.0%	864	23.2%	4.1%	1,313	35.3%	6.5%	1,272	34.2%	4.5%	265	7.1%	5.9%
Male	69,498	100.0%	94.9%	20,188	29.0%	95.8%	18,700	26.9%	93.4%	26,423	38.0%	95.4%	4,187	6.0%	94.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	52,511	100.0%	71.7%	19,781	37.6%	93.9%	6,902	13.1%	34.4%	23,782	45.2%	85.8%	2,046	3.8%	45.9%
Low Priority	9,395	100.0%	12.8%	1,041	11.0%	4.9%	4,479	47.6%	22.3%	3,144	33.4%	11.3%	731	7.7%	16.4%
Priority Level Missing	11,306	100.0%	15.4%	230	2.0%	1.0%	8,632	76.3%	43.1%	769	6.8%	2.7%	1,675	14.8%	37.6%

Note: See attached footnotes for variable definitions and descriptions.

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Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 21 - Sierra Pacific Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	77,949	100.0%	100.0%	21,286	27.3%	100.0%	21,700	27.8%	100.0%	29,610	37.9%	100.0%	5,353	6.8%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	27,499	100.0%	35.2%	5,632	20.4%	26.4%	8,382	30.4%	38.6%	12,031	43.7%	40.6%	1,454	5.2%	27.1%
Urban	49,439	100.0%	63.4%	15,148	30.6%	71.1%	13,246	26.7%	61.0%	17,291	34.9%	58.3%	3,754	7.5%	70.1%
Zip Invalid/Missing	1,011	100.0%	1.2%	506	50.0%	2.3%	72	7.1%	0.3%	288	28.4%	0.9%	145	14.3%	2.7%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	69,917	100.0%	89.6%	19,377	27.7%	91.0%	19,391	27.7%	89.3%	26,301	37.6%	88.8%	4,848	6.9%	90.5%
> 30 miles	7,021	100.0%	9.0%	1,403	19.9%	6.5%	2,237	31.8%	10.3%	3,021	43.0%	10.2%	360	5.1%	6.7%
Zip Invalid/Missing	1,011	100.0%	1.2%	506	50.0%	2.3%	72	7.1%	0.3%	288	28.4%	0.9%	145	14.3%	2.7%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	42,147	100.0%	54.0%	14,347	34.0%	67.4%	10,804	25.6%	49.7%	13,628	32.3%	46.0%	3,368	7.9%	62.9%
> 30 miles	34,791	100.0%	44.6%	6,433	18.4%	30.2%	10,824	31.1%	49.8%	15,694	45.1%	53.0%	1,840	5.2%	34.3%
Zip Invalid/Missing	1,011	100.0%	1.2%	506	50.0%	2.3%	72	7.1%	0.3%	288	28.4%	0.9%	145	14.3%	2.7%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	5,640	100.0%	7.2%	2,455	43.5%	11.5%	860	15.2%	3.9%	1,848	32.7%	6.2%	477	8.4%	8.9%
50-64 years	11,889	100.0%	15.2%	5,357	45.0%	25.1%	1,561	13.1%	7.1%	3,901	32.8%	13.1%	1,070	8.9%	19.9%
≥ 65 years	60,412	100.0%	77.5%	13,473	22.3%	63.2%	19,274	31.9%	88.8%	23,861	39.4%	80.5%	3,804	6.2%	71.0%
Invalid/Missing Age	8	100.0%	0.0%	1	12.5%	0.0%	5	62.5%	0.0%	0	0	0	2	25.0%	0.0%
GENDER ¹⁶															
Female	3,769	100.0%	4.8%	783	20.7%	3.6%	1,324	35.1%	6.1%	1,305	34.6%	4.4%	357	9.4%	6.6%
Male	74,180	100.0%	95.1%	20,503	27.6%	96.3%	20,376	27.4%	93.8%	28,305	38.1%	95.5%	4,996	6.7%	93.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	53,095	100.0%	68.1%	19,785	37.2%	92.9%	6,956	13.1%	32.0%	23,990	45.1%	81.0%	2,364	4.4%	44.1%
Low Priority	12,526	100.0%	16.0%	1,275	10.1%	5.9%	5,332	42.5%	24.5%	4,936	39.4%	16.6%	983	7.8%	18.3%
Priority Level Missing	12,328	100.0%	15.8%	226	1.8%	1.0%	9,412	76.3%	43.3%	684	5.5%	2.3%	2,006	16.2%	37.4%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: 22 - Desert Pacific Healthcare Network

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	69,930	100.0%	100.0%	20,108	28.7%	100.0%	21,139	30.2%	100.0%	23,356	33.3%	100.0%	5,327	7.6%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	10,190	100.0%	14.5%	2,350	23.0%	11.6%	3,428	33.6%	16.2%	3,771	37.0%	16.1%	641	6.2%	12.0%
Urban	58,796	100.0%	84.0%	17,358	29.5%	86.3%	17,640	30.0%	83.4%	19,145	32.5%	81.9%	4,653	7.9%	87.3%
Zip Invalid/Missing	944	100.0%	1.3%	400	42.3%	1.9%	71	7.5%	0.3%	440	46.6%	1.8%	33	3.4%	0.6%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	66,736	100.0%	95.4%	19,219	28.7%	95.5%	20,338	30.4%	96.2%	22,032	33.0%	94.3%	5,147	7.7%	96.6%
> 30 miles	2,250	100.0%	3.2%	489	21.7%	2.4%	730	32.4%	3.4%	884	39.2%	3.7%	147	6.5%	2.7%
Zip Invalid/Missing	944	100.0%	1.3%	400	42.3%	1.9%	71	7.5%	0.3%	440	46.6%	1.8%	33	3.4%	0.6%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	55,764	100.0%	79.7%	16,895	30.2%	84.0%	16,187	29.0%	76.5%	18,275	32.7%	78.2%	4,407	7.9%	82.7%
> 30 miles	13,222	100.0%	18.9%	2,813	21.2%	13.9%	4,881	36.9%	23.0%	4,641	35.1%	19.8%	887	6.7%	16.6%
Zip Invalid/Missing	944	100.0%	1.3%	400	42.3%	1.9%	71	7.5%	0.3%	440	46.6%	1.8%	33	3.4%	0.6%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	5,854	100.0%	8.3%	2,432	41.5%	12.0%	942	16.0%	4.4%	1,985	33.9%	8.4%	495	8.4%	9.2%
50-64 years	11,202	100.0%	16.0%	5,146	45.9%	25.5%	1,564	13.9%	7.3%	3,321	29.6%	14.2%	1,171	10.4%	21.9%
≥ 65 years	52,863	100.0%	75.5%	12,529	23.7%	62.3%	18,625	35.2%	88.1%	18,048	34.1%	77.2%	3,661	6.9%	68.7%
Invalid/Missing Age	11	100.0%	0.0%	1	9.0%	0.0%	8	72.7%	0.0%	2	18.1%	0.0%	0	0	0
GENDER ¹⁶															
Female	3,181	100.0%	4.5%	708	22.2%	3.5%	1,219	38.3%	5.7%	957	30.0%	4.0%	297	9.3%	5.5%
Male	66,749	100.0%	95.4%	19,400	29.0%	96.4%	19,920	29.8%	94.2%	22,399	33.5%	95.9%	5,030	7.5%	94.4%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	46,341	100.0%	66.2%	18,416	39.7%	91.5%	6,573	14.1%	31.0%	18,921	40.8%	81.0%	2,431	5.2%	45.6%
Low Priority	11,045	100.0%	15.7%	1,497	13.5%	7.4%	4,476	40.5%	21.1%	4,007	36.2%	17.1%	1,065	9.6%	19.9%
Priority Level Missing	12,544	100.0%	17.9%	195	1.5%	0.9%	10,090	80.4%	47.7%	428	3.4%	1.8%	1,831	14.5%	34.3%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)

VHA VISN ¹²: No VISN data available

Overall Cohort	Medicare Enrolled Veterans (FFS only) ³			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	8,392	100.0%	100.0%	25	0.2%	100.0%	6,356	75.7%	100.0%	258	3.0%	100.0%	1,753	20.8%	100.0%
TYPE OF ZIP CODE ¹³															
Zip Invalid/Missing	8,392	100.0%	100.0%	25	0.2%	100.0%	6,356	75.7%	100.0%	258	3.0%	100.0%	1,753	20.8%	100.0%
OUTPATIENT DISTANCE ¹⁴															
Zip Invalid/Missing	8,392	100.0%	100.0%	25	0.2%	100.0%	6,356	75.7%	100.0%	258	3.0%	100.0%	1,753	20.8%	100.0%
INPATIENT DISTANCE ¹⁴															
Zip Invalid/Missing	8,392	100.0%	100.0%	25	0.2%	100.0%	6,356	75.7%	100.0%	258	3.0%	100.0%	1,753	20.8%	100.0%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	252	100.0%	3.0%	5	1.9%	20.0%	130	51.5%	2.0%	13	5.1%	5.0%	104	41.2%	5.9%
50-64 years	618	100.0%	7.3%	4	0.6%	16.0%	346	55.9%	5.4%	23	3.7%	8.9%	245	39.6%	13.9%
≥ 65 years	7,517	100.0%	89.5%	16	0.2%	64.0%	5,877	78.1%	92.4%	222	2.9%	86.0%	1,402	18.6%	79.9%
Invalid/Missing Age	5	100.0%	0.0%	0	0	0	3	60.0%	0.0%	0	0	0	2	40.0%	0.1%
GENDER ¹⁶															
Female	85	100.0%	1.0%	0	0	0	61	71.7%	0.9%	2	2.3%	0.7%	22	25.8%	1.2%
Male	8,307	100.0%	98.9%	25	0.3%	100.0%	6,295	75.7%	99.0%	256	3.0%	99.2%	1,731	20.8%	98.7%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	354	100.0%	4.2%	4	1.1%	16.0%	264	74.5%	4.1%	41	11.5%	15.8%	45	12.7%	2.5%
Low Priority	82	100.0%	0.9%	0	0	0	64	78.0%	1.0%	0	0	0	18	21.9%	1.0%
Priority Level Missing	7,956	100.0%	94.8%	21	0.2%	84.0%	6,028	75.7%	94.8%	217	2.7%	84.1%	1,690	21.2%	96.4%

Note: See attached footnotes for variable definitions and descriptions.
VIRc, Hynes

Table 4 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only)
Variable Definitions and Descriptions

3. Medicare Enrolled Veterans (FFS only): Included veterans who met at least one of the following criteria from fiscal year 1997 through 2000: used VHA services, enrolled in the VHA health system, or received compensation or pension benefits from the VA. The file draws from several data sources:

- Office of Policy and Planning (OPP) Enrollment File as of December 1999,
- VISN Support Service Center (VSSC) Unique User File for October 1997-September 2000,
- Veterans Benefits Administration (VBA) Compensation and Pension Non-Users File, and
- The Allocation Resource Center (ARC) Pharmacy Only Users File from October 1997-September 1999.

Demographic information for each veteran, used for comparing to the Medicare demographic data during the match process, was also obtained from these sources.

This column included the veterans in the CMS Denominator file (eligible for Medicare benefits during CY 1999) whose SSN matched an SSN in the above sampling frame, and who also matched on gender and at least 2 of the 3 parts of the date of birth (month/year, day/year, month/day), and who were alive as of January 1, 1999. These veterans were also not enrolled in a Medicare + Choice plan at any time during 1999.

8. Used only VA services: Had at least one occurrence in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient; and no occurrences in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier.

9. Used only Medicare services: Had at least one occurrence in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier; and no occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

10. Used both services: Had at least one occurrence in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier; and at least one occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

11. Used neither service: Had no occurrence in any of these CMS claims files: Part A MedPAR, Outpatient, Part B Carrier; and no occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

12. VISN: Veteran’s Integrated Service Network is based on the zip code of the veteran’s residence. See Appendix E, Section I for details.

13. Type of zip code: Urban/Rural designation. See Appendix E, Section I for details.

14. Outpatient and inpatient distance: Distance between veteran’s residence zip code and the nearest inpatient and outpatient VA facility. See Appendix E, Section I for details.

15. Age: Veteran’s age as of 01/01/1999. See Appendix E, Section II for details.

16. Gender: Sex of the veteran. See Appendix E, Section III for details.

17. Constructed Priority Level: This variable was constructed by VIREC based on three different variables: “Priority Level”, “Means Test”, and “Service Connected Status”. High Priority includes veterans with “Priority Level” 1-6, “Means Test” Category A, or “Service Connected Status” 10-100%. Low Priority includes veterans with “Priority Level” 7 or “Means Test” Category C. See Appendix E, Section IV for details.

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

NATIONAL SUMMARY

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	161,337	100.0%	100.0%	8,633	5.3%	100.0%	63,425	39.3%	100.0%	89,279	55.3%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	74,235	100.0%	46.0%	3,523	4.7%	40.8%	27,130	36.5%	42.7%	43,582	58.7%	48.8%
Urban	84,750	100.0%	52.5%	4,775	5.6%	55.3%	35,484	41.8%	55.9%	44,491	52.4%	49.8%
Zip Invalid/Missing	2,352	100.0%	1.4%	335	14.2%	3.8%	811	34.4%	1.2%	1,206	51.2%	1.3%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	134,898	100.0%	83.6%	7,200	5.3%	83.4%	53,727	39.8%	84.7%	73,971	54.8%	82.8%
> 30 miles	24,087	100.0%	14.9%	1,098	4.5%	12.7%	8,887	36.8%	14.0%	14,102	58.5%	15.7%
Zip Invalid/Missing	2,352	100.0%	1.4%	335	14.2%	3.8%	811	34.4%	1.2%	1,206	51.2%	1.3%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	83,217	100.0%	51.5%	5,433	6.5%	62.9%	33,834	40.6%	53.3%	43,950	52.8%	49.2%
> 30 miles	75,768	100.0%	46.9%	2,865	3.7%	33.1%	28,780	37.9%	45.3%	44,123	58.2%	49.4%
Zip Invalid/Missing	2,352	100.0%	1.4%	335	14.2%	3.8%	811	34.4%	1.2%	1,206	51.2%	1.3%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	1,404	100.0%	0.8%	539	38.3%	6.2%	42	2.9%	0.0%	823	58.6%	0.9%
50-64 years	5,712	100.0%	3.5%	1,399	24.4%	16.2%	930	16.2%	1.4%	3,383	59.2%	3.7%
≥ 65 years	154,204	100.0%	95.5%	6,694	4.3%	77.5%	62,440	40.4%	98.4%	85,070	55.1%	95.2%
Invalid/Missing Age	17	100.0%	0.0%	1	5.8%	0.0%	13	76.4%	0.0%	3	17.6%	0.0%
GENDER ¹⁶												
Male	161,337	100.0%	100.0%	8,633	5.3%	100.0%	63,425	39.3%	100.0%	89,279	55.3%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	93,921	100.0%	58.2%	7,751	8.2%	89.7%	20,151	21.4%	31.7%	66,019	70.2%	73.9%
Low Priority	39,786	100.0%	24.6%	806	2.0%	9.3%	16,750	42.1%	26.4%	22,230	55.8%	24.8%
Priority Level Missing	27,630	100.0%	17.1%	76	0.2%	0.8%	26,524	95.9%	41.8%	1,030	3.7%	1.1%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 1 - VA New England Healthcare System

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	8,908	100.0%	100.0%	358	4.0%	100.0%	4,006	44.9%	100.0%	4,544	51.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	3,287	100.0%	36.8%	115	3.4%	32.1%	1,405	42.7%	35.0%	1,767	53.7%	38.8%
Urban	5,563	100.0%	62.4%	236	4.2%	65.9%	2,591	46.5%	64.6%	2,736	49.1%	60.2%
Zip Invalid/Missing	58	100.0%	0.6%	7	12.0%	1.9%	10	17.2%	0.2%	41	70.6%	0.9%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	8,550	100.0%	95.9%	342	4.0%	95.5%	3,895	45.5%	97.2%	4,313	50.4%	94.9%
> 30 miles	300	100.0%	3.3%	9	3.0%	2.5%	101	33.6%	2.5%	190	63.3%	4.1%
Zip Invalid/Missing	58	100.0%	0.6%	7	12.0%	1.9%	10	17.2%	0.2%	41	70.6%	0.9%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	5,924	100.0%	66.5%	277	4.6%	77.3%	2,659	44.8%	66.3%	2,988	50.4%	65.7%
> 30 miles	2,926	100.0%	32.8%	74	2.5%	20.6%	1,337	45.6%	33.3%	1,515	51.7%	33.3%
Zip Invalid/Missing	58	100.0%	0.6%	7	12.0%	1.9%	10	17.2%	0.2%	41	70.6%	0.9%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	71	100.0%	0.7%	19	26.7%	5.3%	1	1.4%	0.0%	51	71.8%	1.1%
50-64 years	251	100.0%	2.8%	64	25.4%	17.8%	47	18.7%	1.1%	140	55.7%	3.0%
≥ 65 years	8,586	100.0%	96.3%	275	3.2%	76.8%	3,958	46.0%	98.8%	4,353	50.6%	95.7%
GENDER ¹⁶												
Male	8,908	100.0%	100.0%	358	4.0%	100.0%	4,006	44.9%	100.0%	4,544	51.0%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	4,902	100.0%	55.0%	319	6.5%	89.1%	1,119	22.8%	27.9%	3,464	70.6%	76.2%
Low Priority	2,067	100.0%	23.2%	34	1.6%	9.4%	1,010	48.8%	25.2%	1,023	49.4%	22.5%
Priority Level Missing	1,939	100.0%	21.7%	5	0.2%	1.3%	1,877	96.8%	46.8%	57	2.9%	1.2%

Note: See attached footnotes for variable definitions and descriptions.
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Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 2 - VA Healthcare Network Upstate New York

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	5,829	100.0%	100.0%	256	4.3%	100.0%	2,232	38.2%	100.0%	3,341	57.3%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	3,168	100.0%	54.3%	118	3.7%	46.0%	1,224	38.6%	54.8%	1,826	57.6%	54.6%
Urban	2,626	100.0%	45.0%	133	5.0%	51.9%	1,005	38.2%	45.0%	1,488	56.6%	44.5%
Zip Invalid/Missing	35	100.0%	0.6%	5	14.2%	1.9%	3	8.5%	0.1%	27	77.1%	0.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	5,688	100.0%	97.5%	247	4.3%	96.4%	2,188	38.4%	98.0%	3,253	57.1%	97.3%
> 30 miles	106	100.0%	1.8%	4	3.7%	1.5%	41	38.6%	1.8%	61	57.5%	1.8%
Zip Invalid/Missing	35	100.0%	0.6%	5	14.2%	1.9%	3	8.5%	0.1%	27	77.1%	0.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	3,566	100.0%	61.1%	193	5.4%	75.3%	1,451	40.6%	65.0%	1,922	53.8%	57.5%
> 30 miles	2,228	100.0%	38.2%	58	2.6%	22.6%	778	34.9%	34.8%	1,392	62.4%	41.6%
Zip Invalid/Missing	35	100.0%	0.6%	5	14.2%	1.9%	3	8.5%	0.1%	27	77.1%	0.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	25	100.0%	0.4%	8	32.0%	3.1%	2	8.0%	0.0%	15	60.0%	0.4%
50-64 years	186	100.0%	3.1%	34	18.2%	13.2%	29	15.5%	1.2%	123	66.1%	3.6%
≥ 65 years	5,617	100.0%	96.3%	214	3.8%	83.5%	2,200	39.1%	98.5%	3,203	57.0%	95.8%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	1	100.0%	0.0%	0	0	0
GENDER ¹⁶												
Male	5,829	100.0%	100.0%	256	4.3%	100.0%	2,232	38.2%	100.0%	3,341	57.3%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	3,317	100.0%	56.9%	209	6.3%	81.6%	760	22.9%	34.0%	2,348	70.7%	70.2%
Low Priority	1,806	100.0%	30.9%	46	2.5%	17.9%	814	45.0%	36.4%	946	52.3%	28.3%
Priority Level Missing	706	100.0%	12.1%	1	0.1%	0.3%	658	93.2%	29.4%	47	6.6%	1.4%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 3 - VA NY/NJ Veterans Healthcare Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	13,066	100.0%	100.0%	457	3.4%	100.0%	5,851	44.7%	100.0%	6,758	51.7%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,104	100.0%	8.4%	31	2.8%	6.7%	483	43.7%	8.2%	590	53.4%	8.7%
Urban	11,926	100.0%	91.2%	422	3.5%	92.3%	5,356	44.9%	91.5%	6,148	51.5%	90.9%
Zip Invalid/Missing	36	100.0%	0.2%	4	11.1%	0.8%	12	33.3%	0.2%	20	55.5%	0.2%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	13,030	100.0%	99.7%	453	3.4%	99.1%	5,839	44.8%	99.7%	6,738	51.7%	99.7%
Zip Invalid/Missing	36	100.0%	0.2%	4	11.1%	0.8%	12	33.3%	0.2%	20	55.5%	0.2%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	11,963	100.0%	91.5%	434	3.6%	94.9%	5,356	44.7%	91.5%	6,173	51.6%	91.3%
> 30 miles	1,067	100.0%	8.1%	19	1.7%	4.1%	483	45.2%	8.2%	565	52.9%	8.3%
Zip Invalid/Missing	36	100.0%	0.2%	4	11.1%	0.8%	12	33.3%	0.2%	20	55.5%	0.2%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	74	100.0%	0.5%	28	37.8%	6.1%	2	2.7%	0.0%	44	59.4%	0.6%
50-64 years	312	100.0%	2.3%	67	21.4%	14.6%	85	27.2%	1.4%	160	51.2%	2.3%
≥ 65 years	12,679	100.0%	97.0%	361	2.8%	78.9%	5,764	45.4%	98.5%	6,554	51.6%	96.9%
Invalid/Missing Age	1	100.0%	0.0%	1	100.0%	0.2%	0	0	0	0	0	0
GENDER ¹⁶												
Male	13,066	100.0%	100.0%	457	3.4%	100.0%	5,851	44.7%	100.0%	6,758	51.7%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	6,034	100.0%	46.1%	352	5.8%	77.0%	1,818	30.1%	31.0%	3,864	64.0%	57.1%
Low Priority	5,177	100.0%	39.6%	103	1.9%	22.5%	2,307	44.5%	39.4%	2,767	53.4%	40.9%
Priority Level Missing	1,855	100.0%	14.1%	2	0.1%	0.4%	1,726	93.0%	29.4%	127	6.8%	1.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 4 - VA Stars & Stripes Healthcare Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	11,404	100.0%	100.0%	393	3.4%	100.0%	4,490	39.3%	100.0%	6,521	57.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	5,313	100.0%	46.5%	160	3.0%	40.7%	1,939	36.4%	43.1%	3,214	60.4%	49.2%
Urban	6,024	100.0%	52.8%	231	3.8%	58.7%	2,542	42.1%	56.6%	3,251	53.9%	49.8%
Zip Invalid/Missing	67	100.0%	0.5%	2	2.9%	0.5%	9	13.4%	0.2%	56	83.5%	0.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	11,116	100.0%	97.4%	387	3.4%	98.4%	4,374	39.3%	97.4%	6,355	57.1%	97.4%
> 30 miles	221	100.0%	1.9%	4	1.8%	1.0%	107	48.4%	2.3%	110	49.7%	1.6%
Zip Invalid/Missing	67	100.0%	0.5%	2	2.9%	0.5%	9	13.4%	0.2%	56	83.5%	0.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	7,466	100.0%	65.4%	304	4.0%	77.3%	2,985	39.9%	66.4%	4,177	55.9%	64.0%
> 30 miles	3,871	100.0%	33.9%	87	2.2%	22.1%	1,496	38.6%	33.3%	2,288	59.1%	35.0%
Zip Invalid/Missing	67	100.0%	0.5%	2	2.9%	0.5%	9	13.4%	0.2%	56	83.5%	0.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	77	100.0%	0.6%	24	31.1%	6.1%	1	1.2%	0.0%	52	67.5%	0.7%
50-64 years	349	100.0%	3.0%	68	19.4%	17.3%	64	18.3%	1.4%	217	62.1%	3.3%
≥ 65 years	10,975	100.0%	96.2%	301	2.7%	76.5%	4,422	40.2%	98.4%	6,252	56.9%	95.8%
Invalid/Missing Age	3	100.0%	0.0%	0	0	0	3	100.0%	0.0%	0	0	0
GENDER ¹⁶												
Male	11,404	100.0%	100.0%	393	3.4%	100.0%	4,490	39.3%	100.0%	6,521	57.1%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	6,447	100.0%	56.5%	337	5.2%	85.7%	1,592	24.6%	35.4%	4,518	70.0%	69.2%
Low Priority	3,222	100.0%	28.2%	54	1.6%	13.7%	1,197	37.1%	26.6%	1,971	61.1%	30.2%
Priority Level Missing	1,735	100.0%	15.2%	2	0.1%	0.5%	1,701	98.0%	37.8%	32	1.8%	0.4%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 5 - VA Capital Health Care Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	3,893	100.0%	100.0%	381	9.7%	100.0%	1,420	36.4%	100.0%	2,092	53.7%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,258	100.0%	32.3%	75	5.9%	19.6%	433	34.4%	30.4%	750	59.6%	35.8%
Urban	2,535	100.0%	65.1%	261	10.2%	68.5%	982	38.7%	69.1%	1,292	50.9%	61.7%
Zip Invalid/Missing	100	100.0%	2.5%	45	45.0%	11.8%	5	5.0%	0.3%	50	50.0%	2.3%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	3,738	100.0%	96.0%	335	8.9%	87.9%	1,394	37.2%	98.1%	2,009	53.7%	96.0%
> 30 miles	55	100.0%	1.4%	1	1.8%	0.2%	21	38.1%	1.4%	33	60.0%	1.5%
Zip Invalid/Missing	100	100.0%	2.5%	45	45.0%	11.8%	5	5.0%	0.3%	50	50.0%	2.3%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	3,048	100.0%	78.2%	310	10.1%	81.3%	1,160	38.0%	81.6%	1,578	51.7%	75.4%
> 30 miles	745	100.0%	19.1%	26	3.4%	6.8%	255	34.2%	17.9%	464	62.2%	22.1%
Zip Invalid/Missing	100	100.0%	2.5%	45	45.0%	11.8%	5	5.0%	0.3%	50	50.0%	2.3%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	44	100.0%	1.1%	15	34.0%	3.9%	0	0	0	29	65.9%	1.3%
50-64 years	133	100.0%	3.4%	32	24.0%	8.3%	24	18.0%	1.6%	77	57.8%	3.6%
≥ 65 years	3,716	100.0%	95.4%	334	8.9%	87.6%	1,396	37.5%	98.3%	1,986	53.4%	94.9%
GENDER ¹⁶												
Male	3,893	100.0%	100.0%	381	9.7%	100.0%	1,420	36.4%	100.0%	2,092	53.7%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	2,394	100.0%	61.4%	344	14.3%	90.2%	429	17.9%	30.2%	1,621	67.7%	77.4%
Low Priority	734	100.0%	18.8%	30	4.0%	7.8%	276	37.6%	19.4%	428	58.3%	20.4%
Priority Level Missing	765	100.0%	19.6%	7	0.9%	1.8%	715	93.4%	50.3%	43	5.6%	2.0%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 6 - The Mid-Atlantic Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	8,035	100.0%	100.0%	407	5.0%	100.0%	3,456	43.0%	100.0%	4,172	51.9%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	4,770	100.0%	59.3%	203	4.2%	49.8%	2,087	43.7%	60.3%	2,480	51.9%	59.4%
Urban	3,171	100.0%	39.4%	190	5.9%	46.6%	1,360	42.8%	39.3%	1,621	51.1%	38.8%
Zip Invalid/Missing	94	100.0%	1.1%	14	14.8%	3.4%	9	9.5%	0.2%	71	75.5%	1.7%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	5,824	100.0%	72.4%	310	5.3%	76.1%	2,497	42.8%	72.2%	3,017	51.8%	72.3%
> 30 miles	2,117	100.0%	26.3%	83	3.9%	20.3%	950	44.8%	27.4%	1,084	51.2%	25.9%
Zip Invalid/Missing	94	100.0%	1.1%	14	14.8%	3.4%	9	9.5%	0.2%	71	75.5%	1.7%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	3,699	100.0%	46.0%	242	6.5%	59.4%	1,527	41.2%	44.1%	1,930	52.1%	46.2%
> 30 miles	4,242	100.0%	52.7%	151	3.5%	37.1%	1,920	45.2%	55.5%	2,171	51.1%	52.0%
Zip Invalid/Missing	94	100.0%	1.1%	14	14.8%	3.4%	9	9.5%	0.2%	71	75.5%	1.7%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	93	100.0%	1.1%	26	27.9%	6.3%	7	7.5%	0.2%	60	64.5%	1.4%
50-64 years	332	100.0%	4.1%	63	18.9%	15.4%	70	21.0%	2.0%	199	59.9%	4.7%
≥ 65 years	7,610	100.0%	94.7%	318	4.1%	78.1%	3,379	44.4%	97.7%	3,913	51.4%	93.7%
GENDER ¹⁶												
Male	8,035	100.0%	100.0%	407	5.0%	100.0%	3,456	43.0%	100.0%	4,172	51.9%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	4,853	100.0%	60.3%	377	7.7%	92.6%	1,103	22.7%	31.9%	3,373	69.5%	80.8%
Low Priority	1,650	100.0%	20.5%	28	1.6%	6.8%	861	52.1%	24.9%	761	46.1%	18.2%
Priority Level Missing	1,532	100.0%	19.0%	2	0.1%	0.4%	1,492	97.3%	43.1%	38	2.4%	0.9%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 7 - The Atlanta Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	9,299	100.0%	100.0%	467	5.0%	100.0%	3,474	37.3%	100.0%	5,358	57.6%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	5,027	100.0%	54.0%	221	4.3%	47.3%	1,865	37.0%	53.6%	2,941	58.5%	54.8%
Urban	4,148	100.0%	44.6%	227	5.4%	48.6%	1,601	38.5%	46.0%	2,320	55.9%	43.2%
Zip Invalid/Missing	124	100.0%	1.3%	19	15.3%	4.0%	8	6.4%	0.2%	97	78.2%	1.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	6,748	100.0%	72.5%	341	5.0%	73.0%	2,601	38.5%	74.8%	3,806	56.4%	71.0%
> 30 miles	2,427	100.0%	26.0%	107	4.4%	22.9%	865	35.6%	24.8%	1,455	59.9%	27.1%
Zip Invalid/Missing	124	100.0%	1.3%	19	15.3%	4.0%	8	6.4%	0.2%	97	78.2%	1.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	3,270	100.0%	35.1%	247	7.5%	52.8%	1,194	36.5%	34.3%	1,829	55.9%	34.1%
> 30 miles	5,905	100.0%	63.5%	201	3.4%	43.0%	2,272	38.4%	65.4%	3,432	58.1%	64.0%
Zip Invalid/Missing	124	100.0%	1.3%	19	15.3%	4.0%	8	6.4%	0.2%	97	78.2%	1.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	100	100.0%	1.0%	38	38.0%	8.1%	2	2.0%	0.0%	60	60.0%	1.1%
50-64 years	385	100.0%	4.1%	70	18.1%	14.9%	64	16.6%	1.8%	251	65.1%	4.6%
≥ 65 years	8,812	100.0%	94.7%	359	4.0%	76.8%	3,406	38.6%	98.0%	5,047	57.2%	94.1%
Invalid/Missing Age	2	100.0%	0.0%	0	0	0	2	100.0%	0.0%	0	0	0
GENDER ¹⁶												
Male	9,299	100.0%	100.0%	467	5.0%	100.0%	3,474	37.3%	100.0%	5,358	57.6%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	5,759	100.0%	61.9%	429	7.4%	91.8%	1,099	19.0%	31.6%	4,231	73.4%	78.9%
Low Priority	1,812	100.0%	19.4%	36	1.9%	7.7%	684	37.7%	19.6%	1,092	60.2%	20.3%
Priority Level Missing	1,728	100.0%	18.5%	2	0.1%	0.4%	1,691	97.8%	48.6%	35	2.0%	0.6%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 8 - VA Sunshine Healthcare Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	15,595	100.0%	100.0%	676	4.3%	100.0%	6,478	41.5%	100.0%	8,441	54.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	6,776	100.0%	43.4%	352	5.1%	52.0%	2,610	38.5%	40.2%	3,814	56.2%	45.1%
Urban	8,552	100.0%	54.8%	281	3.2%	41.5%	3,830	44.7%	59.1%	4,441	51.9%	52.6%
Zip Invalid/Missing	267	100.0%	1.7%	43	16.1%	6.3%	38	14.2%	0.5%	186	69.6%	2.2%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	14,550	100.0%	93.2%	606	4.1%	89.6%	6,131	42.1%	94.6%	7,813	53.6%	92.5%
> 30 miles	778	100.0%	4.9%	27	3.4%	3.9%	309	39.7%	4.7%	442	56.8%	5.2%
Zip Invalid/Missing	267	100.0%	1.7%	43	16.1%	6.3%	38	14.2%	0.5%	186	69.6%	2.2%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	7,743	100.0%	49.6%	394	5.0%	58.2%	3,100	40.0%	47.8%	4,249	54.8%	50.3%
> 30 miles	7,585	100.0%	48.6%	239	3.1%	35.3%	3,340	44.0%	51.5%	4,006	52.8%	47.4%
Zip Invalid/Missing	267	100.0%	1.7%	43	16.1%	6.3%	38	14.2%	0.5%	186	69.6%	2.2%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	85	100.0%	0.5%	35	41.1%	5.1%	5	5.8%	0.0%	45	52.9%	0.5%
50-64 years	520	100.0%	3.3%	124	23.8%	18.3%	98	18.8%	1.5%	298	57.3%	3.5%
≥ 65 years	14,989	100.0%	96.1%	517	3.4%	76.4%	6,374	42.5%	98.3%	8,098	54.0%	95.9%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	1	100.0%	0.0%	0	0	0
GENDER ¹⁶												
Male	15,595	100.0%	100.0%	676	4.3%	100.0%	6,478	41.5%	100.0%	8,441	54.1%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	9,178	100.0%	58.8%	623	6.7%	92.1%	2,050	22.3%	31.6%	6,505	70.8%	77.0%
Low Priority	3,718	100.0%	23.8%	43	1.1%	6.3%	1,801	48.4%	27.8%	1,874	50.4%	22.2%
Priority Level Missing	2,699	100.0%	17.3%	10	0.3%	1.4%	2,627	97.3%	40.5%	62	2.2%	0.7%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 9 - VA Mid South Healthcare Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	6,619	100.0%	100.0%	457	6.9%	100.0%	2,318	35.0%	100.0%	3,844	58.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	4,318	100.0%	65.2%	256	5.9%	56.0%	1,506	34.8%	64.9%	2,556	59.1%	66.4%
Urban	2,170	100.0%	32.7%	155	7.1%	33.9%	811	37.3%	34.9%	1,204	55.4%	31.3%
Zip Invalid/Missing	131	100.0%	1.9%	46	35.1%	10.0%	1	0.7%	0.0%	84	64.1%	2.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	4,412	100.0%	66.6%	307	6.9%	67.1%	1,547	35.0%	66.7%	2,558	57.9%	66.5%
> 30 miles	2,076	100.0%	31.3%	104	5.0%	22.7%	770	37.0%	33.2%	1,202	57.8%	31.2%
Zip Invalid/Missing	131	100.0%	1.9%	46	35.1%	10.0%	1	0.7%	0.0%	84	64.1%	2.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,506	100.0%	37.8%	216	8.6%	47.2%	837	33.3%	36.1%	1,453	57.9%	37.7%
> 30 miles	3,982	100.0%	60.1%	195	4.8%	42.6%	1,480	37.1%	63.8%	2,307	57.9%	60.0%
Zip Invalid/Missing	131	100.0%	1.9%	46	35.1%	10.0%	1	0.7%	0.0%	84	64.1%	2.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	65	100.0%	0.9%	22	33.8%	4.8%	1	1.5%	0.0%	42	64.6%	1.0%
50-64 years	347	100.0%	5.2%	89	25.6%	19.4%	48	13.8%	2.0%	210	60.5%	5.4%
≥ 65 years	6,207	100.0%	93.7%	346	5.5%	75.7%	2,269	36.5%	97.8%	3,592	57.8%	93.4%
GENDER ¹⁶												
Male	6,619	100.0%	100.0%	457	6.9%	100.0%	2,318	35.0%	100.0%	3,844	58.0%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	4,544	100.0%	68.6%	431	9.4%	94.3%	968	21.3%	41.7%	3,145	69.2%	81.8%
Low Priority	1,075	100.0%	16.2%	20	1.8%	4.3%	395	36.7%	17.0%	660	61.3%	17.1%
Priority Level Missing	1,000	100.0%	15.1%	6	0.6%	1.3%	955	95.5%	41.1%	39	3.9%	1.0%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 10 - VA Healthcare System of Ohio

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	5,388	100.0%	100.0%	257	4.7%	100.0%	2,341	43.4%	100.0%	2,790	51.7%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	2,194	100.0%	40.7%	85	3.8%	33.0%	878	40.0%	37.5%	1,231	56.1%	44.1%
Urban	3,153	100.0%	58.5%	169	5.3%	65.7%	1,455	46.1%	62.1%	1,529	48.4%	54.8%
Zip Invalid/Missing	41	100.0%	0.7%	3	7.3%	1.1%	8	19.5%	0.3%	30	73.1%	1.0%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	5,162	100.0%	95.8%	250	4.8%	97.2%	2,247	43.5%	95.9%	2,665	51.6%	95.5%
> 30 miles	185	100.0%	3.4%	4	2.1%	1.5%	86	46.4%	3.6%	95	51.3%	3.4%
Zip Invalid/Missing	41	100.0%	0.7%	3	7.3%	1.1%	8	19.5%	0.3%	30	73.1%	1.0%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,584	100.0%	47.9%	166	6.4%	64.5%	1,250	48.3%	53.3%	1,168	45.2%	41.8%
> 30 miles	2,763	100.0%	51.2%	88	3.1%	34.2%	1,083	39.1%	46.2%	1,592	57.6%	57.0%
Zip Invalid/Missing	41	100.0%	0.7%	3	7.3%	1.1%	8	19.5%	0.3%	30	73.1%	1.0%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	53	100.0%	0.9%	18	33.9%	7.0%	1	1.8%	0.0%	34	64.1%	1.2%
50-64 years	157	100.0%	2.9%	31	19.7%	12.0%	33	21.0%	1.4%	93	59.2%	3.3%
≥ 65 years	5,178	100.0%	96.1%	208	4.0%	80.9%	2,307	44.5%	98.5%	2,663	51.4%	95.4%
GENDER ¹⁶												
Male	5,388	100.0%	100.0%	257	4.7%	100.0%	2,341	43.4%	100.0%	2,790	51.7%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	3,324	100.0%	61.6%	233	7.0%	90.6%	911	27.4%	38.9%	2,180	65.5%	78.1%
Low Priority	1,061	100.0%	19.6%	23	2.1%	8.9%	446	42.0%	19.0%	592	55.7%	21.2%
Priority Level Missing	1,003	100.0%	18.6%	1	0.0%	0.3%	984	98.1%	42.0%	18	1.7%	0.6%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 11 - Veterans In Partnership

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	8,555	100.0%	100.0%	332	3.8%	100.0%	3,588	41.9%	100.0%	4,635	54.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	3,578	100.0%	41.8%	145	4.0%	43.6%	1,383	38.6%	38.5%	2,050	57.2%	44.2%
Urban	4,931	100.0%	57.6%	179	3.6%	53.9%	2,197	44.5%	61.2%	2,555	51.8%	55.1%
Zip Invalid/Missing	46	100.0%	0.5%	8	17.3%	2.4%	8	17.3%	0.2%	30	65.2%	0.6%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	7,210	100.0%	84.2%	278	3.8%	83.7%	3,053	42.3%	85.0%	3,879	53.8%	83.6%
> 30 miles	1,299	100.0%	15.1%	46	3.5%	13.8%	527	40.5%	14.6%	726	55.8%	15.6%
Zip Invalid/Missing	46	100.0%	0.5%	8	17.3%	2.4%	8	17.3%	0.2%	30	65.2%	0.6%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	4,068	100.0%	47.5%	194	4.7%	58.4%	1,836	45.1%	51.1%	2,038	50.0%	43.9%
> 30 miles	4,441	100.0%	51.9%	130	2.9%	39.1%	1,744	39.2%	48.6%	2,567	57.8%	55.3%
Zip Invalid/Missing	46	100.0%	0.5%	8	17.3%	2.4%	8	17.3%	0.2%	30	65.2%	0.6%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	72	100.0%	0.8%	30	41.6%	9.0%	6	8.3%	0.1%	36	50.0%	0.7%
50-64 years	306	100.0%	3.5%	60	19.6%	18.0%	55	17.9%	1.5%	191	62.4%	4.1%
≥ 65 years	8,176	100.0%	95.5%	242	2.9%	72.8%	3,526	43.1%	98.2%	4,408	53.9%	95.1%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	1	100.0%	0.0%	0	0	0
GENDER ¹⁶												
Male	8,555	100.0%	100.0%	332	3.8%	100.0%	3,588	41.9%	100.0%	4,635	54.1%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	4,687	100.0%	54.7%	288	6.1%	86.7%	1,019	21.7%	28.4%	3,380	72.1%	72.9%
Low Priority	1,963	100.0%	22.9%	41	2.0%	12.3%	722	36.7%	20.1%	1,200	61.1%	25.8%
Priority Level Missing	1,905	100.0%	22.2%	3	0.1%	0.9%	1,847	96.9%	51.4%	55	2.8%	1.1%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 12 - The Great Lakes Health Care System

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	7,718	100.0%	100.0%	432	5.5%	100.0%	3,003	38.9%	100.0%	4,283	55.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	2,535	100.0%	32.8%	104	4.1%	24.0%	911	35.9%	30.3%	1,520	59.9%	35.4%
Urban	5,138	100.0%	66.5%	322	6.2%	74.5%	2,085	40.5%	69.4%	2,731	53.1%	63.7%
Zip Invalid/Missing	45	100.0%	0.5%	6	13.3%	1.3%	7	15.5%	0.2%	32	71.1%	0.7%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	7,157	100.0%	92.7%	408	5.7%	94.4%	2,835	39.6%	94.4%	3,914	54.6%	91.3%
> 30 miles	516	100.0%	6.6%	18	3.4%	4.1%	161	31.2%	5.3%	337	65.3%	7.8%
Zip Invalid/Missing	45	100.0%	0.5%	6	13.3%	1.3%	7	15.5%	0.2%	32	71.1%	0.7%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	4,951	100.0%	64.1%	347	7.0%	80.3%	1,999	40.3%	66.5%	2,605	52.6%	60.8%
> 30 miles	2,722	100.0%	35.2%	79	2.9%	18.2%	997	36.6%	33.2%	1,646	60.4%	38.4%
Zip Invalid/Missing	45	100.0%	0.5%	6	13.3%	1.3%	7	15.5%	0.2%	32	71.1%	0.7%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	70	100.0%	0.9%	26	37.1%	6.0%	1	1.4%	0.0%	43	61.4%	1.0%
50-64 years	197	100.0%	2.5%	49	24.8%	11.3%	31	15.7%	1.0%	117	59.3%	2.7%
≥ 65 years	7,450	100.0%	96.5%	357	4.7%	82.6%	2,970	39.8%	98.9%	4,123	55.3%	96.2%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	1	100.0%	0.0%	0	0	0
GENDER ¹⁶												
Male	7,718	100.0%	100.0%	432	5.5%	100.0%	3,003	38.9%	100.0%	4,283	55.4%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	4,368	100.0%	56.5%	382	8.7%	88.4%	1,097	25.1%	36.5%	2,889	66.1%	67.4%
Low Priority	2,413	100.0%	31.2%	45	1.8%	10.4%	1,037	42.9%	34.5%	1,331	55.1%	31.0%
Priority Level Missing	937	100.0%	12.1%	5	0.5%	1.1%	869	92.7%	28.9%	63	6.7%	1.4%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 13 - VA Upper Midwest Health Care Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	4,829	100.0%	100.0%	255	5.2%	100.0%	1,727	35.7%	100.0%	2,847	58.9%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	3,236	100.0%	67.0%	147	4.5%	57.6%	1,139	35.1%	65.9%	1,950	60.2%	68.4%
Urban	1,515	100.0%	31.3%	95	6.2%	37.2%	586	38.6%	33.9%	834	55.0%	29.2%
Zip Invalid/Missing	78	100.0%	1.6%	13	16.6%	5.0%	2	2.5%	0.1%	63	80.7%	2.2%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,788	100.0%	57.7%	162	5.8%	63.5%	1,034	37.0%	59.8%	1,592	57.1%	55.9%
> 30 miles	1,963	100.0%	40.6%	80	4.0%	31.3%	691	35.2%	40.0%	1,192	60.7%	41.8%
Zip Invalid/Missing	78	100.0%	1.6%	13	16.6%	5.0%	2	2.5%	0.1%	63	80.7%	2.2%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,513	100.0%	31.3%	123	8.1%	48.2%	547	36.1%	31.6%	843	55.7%	29.6%
> 30 miles	3,238	100.0%	67.0%	119	3.6%	46.6%	1,178	36.3%	68.2%	1,941	59.9%	68.1%
Zip Invalid/Missing	78	100.0%	1.6%	13	16.6%	5.0%	2	2.5%	0.1%	63	80.7%	2.2%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	35	100.0%	0.7%	14	40.0%	5.4%	1	2.8%	0.0%	20	57.1%	0.7%
50-64 years	119	100.0%	2.4%	24	20.1%	9.4%	18	15.1%	1.0%	77	64.7%	2.7%
≥ 65 years	4,675	100.0%	96.8%	217	4.6%	85.0%	1,708	36.5%	98.8%	2,750	58.8%	96.5%
GENDER ¹⁶												
Male	4,829	100.0%	100.0%	255	5.2%	100.0%	1,727	35.7%	100.0%	2,847	58.9%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	2,476	100.0%	51.2%	225	9.0%	88.2%	398	16.0%	23.0%	1,853	74.8%	65.0%
Low Priority	1,605	100.0%	33.2%	27	1.6%	10.5%	645	40.1%	37.3%	933	58.1%	32.7%
Priority Level Missing	748	100.0%	15.4%	3	0.4%	1.1%	684	91.4%	39.6%	61	8.1%	2.1%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 14 - Central Plains Health Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	4,023	100.0%	100.0%	129	3.2%	100.0%	1,303	32.3%	100.0%	2,591	64.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	3,115	100.0%	77.4%	84	2.6%	65.1%	977	31.3%	74.9%	2,054	65.9%	79.2%
Urban	894	100.0%	22.2%	43	4.8%	33.3%	326	36.4%	25.0%	525	58.7%	20.2%
Zip Invalid/Missing	14	100.0%	0.3%	2	14.2%	1.5%	0	0	0	12	85.7%	0.4%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,535	100.0%	63.0%	93	3.6%	72.0%	860	33.9%	66.0%	1,582	62.4%	61.0%
> 30 miles	1,474	100.0%	36.6%	34	2.3%	26.3%	443	30.0%	33.9%	997	67.6%	38.4%
Zip Invalid/Missing	14	100.0%	0.3%	2	14.2%	1.5%	0	0	0	12	85.7%	0.4%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	753	100.0%	18.7%	46	6.1%	35.6%	263	34.9%	20.1%	444	58.9%	17.1%
> 30 miles	3,256	100.0%	80.9%	81	2.4%	62.7%	1,040	31.9%	79.8%	2,135	65.5%	82.4%
Zip Invalid/Missing	14	100.0%	0.3%	2	14.2%	1.5%	0	0	0	12	85.7%	0.4%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	16	100.0%	0.3%	5	31.2%	3.8%	0	0	0	11	68.7%	0.4%
50-64 years	112	100.0%	2.7%	22	19.6%	17.0%	15	13.3%	1.1%	75	66.9%	2.8%
≥ 65 years	3,894	100.0%	96.7%	102	2.6%	79.0%	1,287	33.0%	98.7%	2,505	64.3%	96.6%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	1	100.0%	0.0%	0	0	0
GENDER ¹⁶												
Male	4,023	100.0%	100.0%	129	3.2%	100.0%	1,303	32.3%	100.0%	2,591	64.4%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,858	100.0%	46.1%	111	5.9%	86.0%	327	17.5%	25.0%	1,420	76.4%	54.8%
Low Priority	1,732	100.0%	43.0%	18	1.0%	13.9%	567	32.7%	43.5%	1,147	66.2%	44.2%
Priority Level Missing	433	100.0%	10.7%	0	0	0	409	94.4%	31.3%	24	5.5%	0.9%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 15 - VA Heartland Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	6,424	100.0%	100.0%	356	5.5%	100.0%	2,046	31.8%	100.0%	4,022	62.6%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	4,358	100.0%	67.8%	208	4.7%	58.4%	1,315	30.1%	64.2%	2,835	65.0%	70.4%
Urban	2,034	100.0%	31.6%	142	6.9%	39.8%	729	35.8%	35.6%	1,163	57.1%	28.9%
Zip Invalid/Missing	32	100.0%	0.4%	6	18.7%	1.6%	2	6.2%	0.0%	24	75.0%	0.5%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	4,640	100.0%	72.2%	275	5.9%	77.2%	1,448	31.2%	70.7%	2,917	62.8%	72.5%
> 30 miles	1,752	100.0%	27.2%	75	4.2%	21.0%	596	34.0%	29.1%	1,081	61.7%	26.8%
Zip Invalid/Missing	32	100.0%	0.4%	6	18.7%	1.6%	2	6.2%	0.0%	24	75.0%	0.5%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,655	100.0%	41.3%	192	7.2%	53.9%	915	34.4%	44.7%	1,548	58.3%	38.4%
> 30 miles	3,737	100.0%	58.1%	158	4.2%	44.3%	1,129	30.2%	55.1%	2,450	65.5%	60.9%
Zip Invalid/Missing	32	100.0%	0.4%	6	18.7%	1.6%	2	6.2%	0.0%	24	75.0%	0.5%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	50	100.0%	0.7%	23	46.0%	6.4%	1	2.0%	0.0%	26	52.0%	0.6%
50-64 years	237	100.0%	3.6%	60	25.3%	16.8%	20	8.4%	0.9%	157	66.2%	3.9%
≥ 65 years	6,137	100.0%	95.5%	273	4.4%	76.6%	2,025	32.9%	98.9%	3,839	62.5%	95.4%
GENDER ¹⁶												
Male	6,424	100.0%	100.0%	356	5.5%	100.0%	2,046	31.8%	100.0%	4,022	62.6%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	3,853	100.0%	59.9%	326	8.4%	91.5%	600	15.5%	29.3%	2,927	75.9%	72.7%
Low Priority	1,665	100.0%	25.9%	28	1.6%	7.8%	566	33.9%	27.6%	1,071	64.3%	26.6%
Priority Level Missing	906	100.0%	14.1%	2	0.2%	0.5%	880	97.1%	43.0%	24	2.6%	0.5%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 16 - South Central VA Healthcare Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	11,971	100.0%	100.0%	816	6.8%	100.0%	4,217	35.2%	100.0%	6,938	57.9%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	7,225	100.0%	60.3%	394	5.4%	48.2%	2,455	33.9%	58.2%	4,376	60.5%	63.0%
Urban	4,611	100.0%	38.5%	393	8.5%	48.1%	1,756	38.0%	41.6%	2,462	53.3%	35.4%
Zip Invalid/Missing	135	100.0%	1.1%	29	21.4%	3.5%	6	4.4%	0.1%	100	74.0%	1.4%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	7,721	100.0%	64.4%	585	7.5%	71.6%	2,690	34.8%	63.7%	4,446	57.5%	64.0%
> 30 miles	4,115	100.0%	34.3%	202	4.9%	24.7%	1,521	36.9%	36.0%	2,392	58.1%	34.4%
Zip Invalid/Missing	135	100.0%	1.1%	29	21.4%	3.5%	6	4.4%	0.1%	100	74.0%	1.4%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	3,709	100.0%	30.9%	414	11.1%	50.7%	1,271	34.2%	30.1%	2,024	54.5%	29.1%
> 30 miles	8,127	100.0%	67.8%	373	4.5%	45.7%	2,940	36.1%	69.7%	4,814	59.2%	69.3%
Zip Invalid/Missing	135	100.0%	1.1%	29	21.4%	3.5%	6	4.4%	0.1%	100	74.0%	1.4%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	127	100.0%	1.0%	60	47.2%	7.3%	2	1.5%	0.0%	65	51.1%	0.9%
50-64 years	538	100.0%	4.4%	135	25.0%	16.5%	62	11.5%	1.4%	341	63.3%	4.9%
≥ 65 years	11,302	100.0%	94.4%	621	5.4%	76.1%	4,151	36.7%	98.4%	6,530	57.7%	94.1%
Invalid/Missing Age	4	100.0%	0.0%	0	0	0	2	50.0%	0.0%	2	50.0%	0.0%
GENDER ¹⁶												
Male	11,971	100.0%	100.0%	816	6.8%	100.0%	4,217	35.2%	100.0%	6,938	57.9%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	8,276	100.0%	69.1%	781	9.4%	95.7%	1,567	18.9%	37.1%	5,928	71.6%	85.4%
Low Priority	1,608	100.0%	13.4%	31	1.9%	3.7%	632	39.3%	14.9%	945	58.7%	13.6%
Priority Level Missing	2,087	100.0%	17.4%	4	0.1%	0.4%	2,018	96.6%	47.8%	65	3.1%	0.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 17 - VA Heart of Texas Health Care Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	5,212	100.0%	100.0%	364	6.9%	100.0%	1,871	35.8%	100.0%	2,977	57.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	2,661	100.0%	51.0%	178	6.6%	48.9%	908	34.1%	48.5%	1,575	59.1%	52.9%
Urban	2,509	100.0%	48.1%	179	7.1%	49.1%	954	38.0%	50.9%	1,376	54.8%	46.2%
Zip Invalid/Missing	42	100.0%	0.8%	7	16.6%	1.9%	9	21.4%	0.4%	26	61.9%	0.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	4,654	100.0%	89.2%	324	6.9%	89.0%	1,670	35.8%	89.2%	2,660	57.1%	89.3%
> 30 miles	516	100.0%	9.9%	33	6.3%	9.0%	192	37.2%	10.2%	291	56.3%	9.7%
Zip Invalid/Missing	42	100.0%	0.8%	7	16.6%	1.9%	9	21.4%	0.4%	26	61.9%	0.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,128	100.0%	40.8%	191	8.9%	52.4%	779	36.6%	41.6%	1,158	54.4%	38.8%
> 30 miles	3,042	100.0%	58.3%	166	5.4%	45.6%	1,083	35.6%	57.8%	1,793	58.9%	60.2%
Zip Invalid/Missing	42	100.0%	0.8%	7	16.6%	1.9%	9	21.4%	0.4%	26	61.9%	0.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	47	100.0%	0.9%	26	55.3%	7.1%	1	2.1%	0.0%	20	42.5%	0.6%
50-64 years	207	100.0%	3.9%	70	33.8%	19.2%	23	11.1%	1.2%	114	55.0%	3.8%
≥ 65 years	4,958	100.0%	95.1%	268	5.4%	73.6%	1,847	37.2%	98.7%	2,843	57.3%	95.4%
GENDER ¹⁶												
Male	5,212	100.0%	100.0%	364	6.9%	100.0%	1,871	35.8%	100.0%	2,977	57.1%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	3,532	100.0%	67.7%	336	9.5%	92.3%	678	19.1%	36.2%	2,518	71.2%	84.5%
Low Priority	801	100.0%	15.3%	27	3.3%	7.4%	351	43.8%	18.7%	423	52.8%	14.2%
Priority Level Missing	879	100.0%	16.8%	1	0.1%	0.2%	842	95.7%	45.0%	36	4.0%	1.2%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 18 - VA Southwest Health Care Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	5,383	100.0%	100.0%	405	7.5%	100.0%	1,745	32.4%	100.0%	3,233	60.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	2,765	100.0%	51.3%	188	6.7%	46.4%	839	30.3%	48.0%	1,738	62.8%	53.7%
Urban	2,545	100.0%	47.2%	195	7.6%	48.1%	902	35.4%	51.6%	1,448	56.8%	44.7%
Zip Invalid/Missing	73	100.0%	1.3%	22	30.1%	5.4%	4	5.4%	0.2%	47	64.3%	1.4%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	4,134	100.0%	76.7%	310	7.4%	76.5%	1,383	33.4%	79.2%	2,441	59.0%	75.5%
> 30 miles	1,176	100.0%	21.8%	73	6.2%	18.0%	358	30.4%	20.5%	745	63.3%	23.0%
Zip Invalid/Missing	73	100.0%	1.3%	22	30.1%	5.4%	4	5.4%	0.2%	47	64.3%	1.4%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,234	100.0%	41.5%	204	9.1%	50.3%	843	37.7%	48.3%	1,187	53.1%	36.7%
> 30 miles	3,076	100.0%	57.1%	179	5.8%	44.1%	898	29.1%	51.4%	1,999	64.9%	61.8%
Zip Invalid/Missing	73	100.0%	1.3%	22	30.1%	5.4%	4	5.4%	0.2%	47	64.3%	1.4%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	49	100.0%	0.9%	21	42.8%	5.1%	0	0	0	28	57.1%	0.8%
50-64 years	227	100.0%	4.2%	77	33.9%	19.0%	26	11.4%	1.4%	124	54.6%	3.8%
≥ 65 years	5,107	100.0%	94.8%	307	6.0%	75.8%	1,719	33.6%	98.5%	3,081	60.3%	95.2%
GENDER ¹⁶												
Male	5,383	100.0%	100.0%	405	7.5%	100.0%	1,745	32.4%	100.0%	3,233	60.0%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	3,332	100.0%	61.8%	364	10.9%	89.8%	553	16.5%	31.6%	2,415	72.4%	74.6%
Low Priority	1,316	100.0%	24.4%	39	2.9%	9.6%	492	37.3%	28.1%	785	59.6%	24.2%
Priority Level Missing	735	100.0%	13.6%	2	0.2%	0.4%	700	95.2%	40.1%	33	4.4%	1.0%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 19 - Rocky Mountain Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	4,102	100.0%	100.0%	300	7.3%	100.0%	1,438	35.0%	100.0%	2,364	57.6%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	2,203	100.0%	53.7%	118	5.3%	39.3%	732	33.2%	50.9%	1,353	61.4%	57.2%
Urban	1,758	100.0%	42.8%	153	8.7%	51.0%	704	40.0%	48.9%	901	51.2%	38.1%
Zip Invalid/Missing	141	100.0%	3.4%	29	20.5%	9.6%	2	1.4%	0.1%	110	78.0%	4.6%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,931	100.0%	71.4%	225	7.6%	75.0%	1,063	36.2%	73.9%	1,643	56.0%	69.5%
> 30 miles	1,030	100.0%	25.1%	46	4.4%	15.3%	373	36.2%	25.9%	611	59.3%	25.8%
Zip Invalid/Missing	141	100.0%	3.4%	29	20.5%	9.6%	2	1.4%	0.1%	110	78.0%	4.6%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,289	100.0%	31.4%	138	10.7%	46.0%	504	39.1%	35.0%	647	50.1%	27.3%
> 30 miles	2,672	100.0%	65.1%	133	4.9%	44.3%	932	34.8%	64.8%	1,607	60.1%	67.9%
Zip Invalid/Missing	141	100.0%	3.4%	29	20.5%	9.6%	2	1.4%	0.1%	110	78.0%	4.6%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	41	100.0%	0.9%	16	39.0%	5.3%	1	2.4%	0.0%	24	58.5%	1.0%
50-64 years	151	100.0%	3.6%	57	37.7%	19.0%	17	11.2%	1.1%	77	50.9%	3.2%
≥ 65 years	3,910	100.0%	95.3%	227	5.8%	75.6%	1,420	36.3%	98.7%	2,263	57.8%	95.7%
GENDER ¹⁶												
Male	4,102	100.0%	100.0%	300	7.3%	100.0%	1,438	35.0%	100.0%	2,364	57.6%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	2,351	100.0%	57.3%	273	11.6%	91.0%	419	17.8%	29.1%	1,659	70.5%	70.1%
Low Priority	1,178	100.0%	28.7%	24	2.0%	8.0%	461	39.1%	32.0%	693	58.8%	29.3%
Priority Level Missing	573	100.0%	13.9%	3	0.5%	1.0%	558	97.3%	38.8%	12	2.0%	0.5%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 20 - Northwest Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	4,454	100.0%	100.0%	370	8.3%	100.0%	1,774	39.8%	100.0%	2,310	51.8%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	2,687	100.0%	60.3%	197	7.3%	53.2%	1,024	38.1%	57.7%	1,466	54.5%	63.4%
Urban	1,752	100.0%	39.3%	171	9.7%	46.2%	746	42.5%	42.0%	835	47.6%	36.1%
Zip Invalid/Missing	15	100.0%	0.3%	2	13.3%	0.5%	4	26.6%	0.2%	9	60.0%	0.3%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	3,080	100.0%	69.1%	259	8.4%	70.0%	1,232	40.0%	69.4%	1,589	51.5%	68.7%
> 30 miles	1,359	100.0%	30.5%	109	8.0%	29.4%	538	39.5%	30.3%	712	52.3%	30.8%
Zip Invalid/Missing	15	100.0%	0.3%	2	13.3%	0.5%	4	26.6%	0.2%	9	60.0%	0.3%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,837	100.0%	41.2%	205	11.1%	55.4%	741	40.3%	41.7%	891	48.5%	38.5%
> 30 miles	2,602	100.0%	58.4%	163	6.2%	44.0%	1,029	39.5%	58.0%	1,410	54.1%	61.0%
Zip Invalid/Missing	15	100.0%	0.3%	2	13.3%	0.5%	4	26.6%	0.2%	9	60.0%	0.3%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	58	100.0%	1.3%	22	37.9%	5.9%	0	0	0	36	62.0%	1.5%
50-64 years	205	100.0%	4.6%	66	32.1%	17.8%	31	15.1%	1.7%	108	52.6%	4.6%
≥ 65 years	4,191	100.0%	94.0%	282	6.7%	76.2%	1,743	41.5%	98.2%	2,166	51.6%	93.7%
GENDER ¹⁶												
Male	4,454	100.0%	100.0%	370	8.3%	100.0%	1,774	39.8%	100.0%	2,310	51.8%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	2,717	100.0%	61.0%	335	12.3%	90.5%	485	17.8%	27.3%	1,897	69.8%	82.1%
Low Priority	867	100.0%	19.4%	31	3.5%	8.3%	471	54.3%	26.5%	365	42.0%	15.8%
Priority Level Missing	870	100.0%	19.5%	4	0.4%	1.0%	818	94.0%	46.1%	48	5.5%	2.0%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 21 - Sierra Pacific Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	5,015	100.0%	100.0%	387	7.7%	100.0%	1,879	37.4%	100.0%	2,749	54.8%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,918	100.0%	38.2%	96	5.0%	24.8%	711	37.0%	37.8%	1,111	57.9%	40.4%
Urban	3,052	100.0%	60.8%	277	9.0%	71.5%	1,163	38.1%	61.8%	1,612	52.8%	58.6%
Zip Invalid/Missing	45	100.0%	0.8%	14	31.1%	3.6%	5	11.1%	0.2%	26	57.7%	0.9%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	4,492	100.0%	89.5%	348	7.7%	89.9%	1,687	37.5%	89.7%	2,457	54.6%	89.3%
> 30 miles	478	100.0%	9.5%	25	5.2%	6.4%	187	39.1%	9.9%	266	55.6%	9.6%
Zip Invalid/Missing	45	100.0%	0.8%	14	31.1%	3.6%	5	11.1%	0.2%	26	57.7%	0.9%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,419	100.0%	48.2%	268	11.0%	69.2%	965	39.8%	51.3%	1,186	49.0%	43.1%
> 30 miles	2,551	100.0%	50.8%	105	4.1%	27.1%	909	35.6%	48.3%	1,537	60.2%	55.9%
Zip Invalid/Missing	45	100.0%	0.8%	14	31.1%	3.6%	5	11.1%	0.2%	26	57.7%	0.9%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	67	100.0%	1.3%	30	44.7%	7.7%	2	2.9%	0.1%	35	52.2%	1.2%
50-64 years	196	100.0%	3.9%	60	30.6%	15.5%	32	16.3%	1.7%	104	53.0%	3.7%
≥ 65 years	4,751	100.0%	94.7%	297	6.2%	76.7%	1,844	38.8%	98.1%	2,610	54.9%	94.9%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	1	100.0%	0.0%	0	0	0
GENDER ¹⁶												
Male	5,015	100.0%	100.0%	387	7.7%	100.0%	1,879	37.4%	100.0%	2,749	54.8%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	2,971	100.0%	59.2%	350	11.7%	90.4%	558	18.7%	29.6%	2,063	69.4%	75.0%
Low Priority	1,216	100.0%	24.2%	33	2.7%	8.5%	531	43.6%	28.2%	652	53.6%	23.7%
Priority Level Missing	828	100.0%	16.5%	4	0.4%	1.0%	790	95.4%	42.0%	34	4.1%	1.2%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: 22 - Desert Pacific Healthcare Network

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	4,920	100.0%	100.0%	377	7.6%	100.0%	2,112	42.9%	100.0%	2,431	49.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	739	100.0%	15.0%	48	6.4%	12.7%	306	41.4%	14.4%	385	52.0%	15.8%
Urban	4,143	100.0%	84.2%	321	7.7%	85.1%	1,803	43.5%	85.3%	2,019	48.7%	83.0%
Zip Invalid/Missing	38	100.0%	0.7%	8	21.0%	2.1%	3	7.8%	0.1%	27	71.0%	1.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	4,738	100.0%	96.3%	355	7.4%	94.1%	2,059	43.4%	97.4%	2,324	49.0%	95.5%
> 30 miles	144	100.0%	2.9%	14	9.7%	3.7%	50	34.7%	2.3%	80	55.5%	3.2%
Zip Invalid/Missing	38	100.0%	0.7%	8	21.0%	2.1%	3	7.8%	0.1%	27	71.0%	1.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	3,892	100.0%	79.1%	328	8.4%	87.0%	1,652	42.4%	78.2%	1,912	49.1%	78.6%
> 30 miles	990	100.0%	20.1%	41	4.1%	10.8%	457	46.1%	21.6%	492	49.6%	20.2%
Zip Invalid/Missing	38	100.0%	0.7%	8	21.0%	2.1%	3	7.8%	0.1%	27	71.0%	1.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	84	100.0%	1.7%	33	39.2%	8.7%	4	4.7%	0.1%	47	55.9%	1.9%
50-64 years	237	100.0%	4.8%	77	32.4%	20.4%	32	13.5%	1.5%	128	54.0%	5.2%
≥ 65 years	4,598	100.0%	93.4%	267	5.8%	70.8%	2,076	45.1%	98.2%	2,255	49.0%	92.7%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	0	0	0	1	100.0%	0.0%
GENDER ¹⁶												
Male	4,920	100.0%	100.0%	377	7.6%	100.0%	2,112	42.9%	100.0%	2,431	49.4%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	2,707	100.0%	55.0%	326	12.0%	86.4%	568	20.9%	26.8%	1,813	66.9%	74.5%
Low Priority	1,093	100.0%	22.2%	45	4.1%	11.9%	477	43.6%	22.5%	571	52.2%	23.4%
Priority Level Missing	1,120	100.0%	22.7%	6	0.5%	1.5%	1,067	95.2%	50.5%	47	4.1%	1.9%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer

VHA VISN ¹²: No VISN data available

Prostate Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁴			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	695	100.0%	100.0%	1	0.1%	100.0%	656	94.3%	100.0%	38	5.4%	100.0%
TYPE OF ZIP CODE ¹³												
Zip Invalid/Missing	695	100.0%	100.0%	1	0.1%	100.0%	656	94.3%	100.0%	38	5.4%	100.0%
OUTPATIENT DISTANCE ¹⁴												
Zip Invalid/Missing	695	100.0%	100.0%	1	0.1%	100.0%	656	94.3%	100.0%	38	5.4%	100.0%
INPATIENT DISTANCE ¹⁴												
Zip Invalid/Missing	695	100.0%	100.0%	1	0.1%	100.0%	656	94.3%	100.0%	38	5.4%	100.0%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	1	100.0%	0.1%	0	0	0	1	100.0%	0.1%	0	0	0
50-64 years	8	100.0%	1.1%	0	0	0	6	75.0%	0.9%	2	25.0%	5.2%
≥ 65 years	686	100.0%	98.7%	1	0.1%	100.0%	649	94.6%	98.9%	36	5.2%	94.7%
GENDER ¹⁶												
Male	695	100.0%	100.0%	1	0.1%	100.0%	656	94.3%	100.0%	38	5.4%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	41	100.0%	5.8%	0	0	0	33	80.4%	5.0%	8	19.5%	21.0%
Low Priority	7	100.0%	1.0%	0	0	0	7	100.0%	1.0%	0	0	0
Priority Level Missing	647	100.0%	93.0%	1	0.1%	100.0%	616	95.2%	93.9%	30	4.6%	78.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 5 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Prostate Cancer
Variable Definitions and Descriptions

4. Medicare Enrolled Veterans (FFS only) in Prostate Cancer Cohort: Included veterans who met at least one of the following criteria from fiscal year 1997 through 2000: used VHA services, enrolled in the VHA health system, or received compensation or pension benefits from the VA. The file draws from several data sources:

- Office of Policy and Planning (OPP) Enrollment File as of December 1999,
- VISN Support Service Center (VSSC) Unique User File for October 1997-September 2000,
- Veterans Benefits Administration (VBA) Compensation and Pension Non-Users File, and
- The Allocation Resource Center (ARC) Pharmacy Only Users File from October 1997-September 1999.

Demographic information for each veteran, used for comparing to the Medicare demographic data during the match process, was also obtained from these sources.

This column included the veterans in the CMS Denominator file (eligible for Medicare benefits during CY 1999) whose SSN matched an SSN in the above sampling frame, and who also matched on gender and at least 2 of the 3 parts of the date of birth (month/year, day/year, month/day), and who were alive as of January 1, 1999. These veterans were also not enrolled in a Medicare + Choice plan at any time during 1999 and had a diagnosis of prostate cancer (ICD-9-CM=185) during 1999 in one of the following datasets: VA Inpatient Main, VA Outpatient Diagnosis, VA Fee Basis Inpatient, VA Fee Basis Outpatient; CMS Part A MedPAR, CMS Part A Outpatient, or CMS Part B Carrier.

8. Used only VA services: Had at least one occurrence in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient; and no occurrences in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier.

9. Used only Medicare services: Had at least one occurrence in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier; and no occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

10. Used both services: Had at least one occurrence in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier; and at least one occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

11. Used neither service: Had no occurrence in any of these CMS claims files: Part A MedPAR, Outpatient, Part B Carrier; and no occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

12. VISN: Veteran's Integrated Service Network is based on the zip code of the veteran's residence. See Appendix E, Section I for details.

13. Type of zip code: Urban/Rural designation. See Appendix E, Section I for details.

14. Outpatient and inpatient distance: Distance between veteran's residence zip code and the nearest inpatient and outpatient VA facility. See Appendix E, Section I for details.

15. Age: Veteran's age as of 01/01/1999. See Appendix E, Section II for details.

16. Gender: Sex of the veteran. See Appendix E, Section III for details.

17. Constructed Priority Level: This variable was constructed by VIREC based on three different variables: "Priority Level", "Means Test", and "Service Connected Status". High Priority includes veterans with "Priority Level" 1-6, "Means Test" Category A, or "Service Connected Status" 10-100%. Low Priority includes veterans with "Priority Level" 7 or "Means Test" Category C. See Appendix E, Section IV for details.

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

NATIONAL SUMMARY

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	35,768	100.0%	100.0%	4,420	12.3%	100.0%	10,498	29.3%	100.0%	20,850	58.2%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	17,435	100.0%	48.7%	1,923	11.0%	43.5%	4,762	27.3%	45.3%	10,750	61.6%	51.5%
Urban	17,522	100.0%	48.9%	2,310	13.1%	52.2%	5,551	31.6%	52.8%	9,661	55.1%	46.3%
Zip Invalid/Missing	811	100.0%	2.2%	187	23.0%	4.2%	185	22.8%	1.7%	439	54.1%	2.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	29,089	100.0%	81.3%	3,655	12.5%	82.6%	8,737	30.0%	83.2%	16,697	57.3%	80.0%
> 30 miles	5,868	100.0%	16.4%	578	9.8%	13.0%	1,576	26.8%	15.0%	3,714	63.2%	17.8%
Zip Invalid/Missing	811	100.0%	2.2%	187	23.0%	4.2%	185	22.8%	1.7%	439	54.1%	2.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	17,725	100.0%	49.5%	2,802	15.8%	63.3%	5,323	30.0%	50.7%	9,600	54.1%	46.0%
> 30 miles	17,232	100.0%	48.1%	1,431	8.3%	32.3%	4,990	28.9%	47.5%	10,811	62.7%	51.8%
Zip Invalid/Missing	811	100.0%	2.2%	187	23.0%	4.2%	185	22.8%	1.7%	439	54.1%	2.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	597	100.0%	1.6%	190	31.8%	4.2%	60	10.0%	0.5%	347	58.1%	1.6%
50-64 years	2,913	100.0%	8.1%	733	25.1%	16.5%	516	17.7%	4.9%	1,664	57.1%	7.9%
≥ 65 years	32,254	100.0%	90.1%	3,496	10.8%	79.0%	9,919	30.7%	94.4%	18,839	58.4%	90.3%
Invalid/Missing Age	4	100.0%	0.0%	1	25.0%	0.0%	3	75.0%	0.0%	0	0	0
GENDER ¹⁶												
Female	897	100.0%	2.5%	80	8.9%	1.8%	338	37.6%	3.2%	479	53.4%	2.2%
Male	34,871	100.0%	97.4%	4,340	12.4%	98.1%	10,160	29.1%	96.7%	20,371	58.4%	97.7%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	25,404	100.0%	71.0%	4,146	16.3%	93.8%	4,338	17.0%	41.3%	16,920	66.6%	81.1%
Low Priority	5,954	100.0%	16.6%	224	3.7%	5.0%	2,318	38.9%	22.0%	3,412	57.3%	16.3%
Priority Level Missing	4,410	100.0%	12.3%	50	1.1%	1.1%	3,842	87.1%	36.5%	518	11.7%	2.4%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 1 - VA New England Healthcare System

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,016	100.0%	100.0%	181	8.9%	100.0%	684	33.9%	100.0%	1,151	57.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	739	100.0%	36.6%	54	7.3%	29.8%	231	31.2%	33.7%	454	61.4%	39.4%
Urban	1,250	100.0%	62.0%	122	9.7%	67.4%	448	35.8%	65.4%	680	54.4%	59.0%
Zip Invalid/Missing	27	100.0%	1.3%	5	18.5%	2.7%	5	18.5%	0.7%	17	62.9%	1.4%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,922	100.0%	95.3%	171	8.8%	94.4%	661	34.3%	96.6%	1,090	56.7%	94.7%
> 30 miles	67	100.0%	3.3%	5	7.4%	2.7%	18	26.8%	2.6%	44	65.6%	3.8%
Zip Invalid/Missing	27	100.0%	1.3%	5	18.5%	2.7%	5	18.5%	0.7%	17	62.9%	1.4%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,421	100.0%	70.4%	145	10.2%	80.1%	493	34.6%	72.0%	783	55.1%	68.0%
> 30 miles	568	100.0%	28.1%	31	5.4%	17.1%	186	32.7%	27.1%	351	61.7%	30.4%
Zip Invalid/Missing	27	100.0%	1.3%	5	18.5%	2.7%	5	18.5%	0.7%	17	62.9%	1.4%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	36	100.0%	1.7%	9	25.0%	4.9%	6	16.6%	0.8%	21	58.3%	1.8%
50-64 years	139	100.0%	6.8%	28	20.1%	15.4%	24	17.2%	3.5%	87	62.5%	7.5%
≥ 65 years	1,841	100.0%	91.3%	144	7.8%	79.5%	654	35.5%	95.6%	1,043	56.6%	90.6%
GENDER ¹⁶												
Female	61	100.0%	3.0%	2	3.2%	1.1%	32	52.4%	4.6%	27	44.2%	2.3%
Male	1,955	100.0%	96.9%	179	9.1%	98.8%	652	33.3%	95.3%	1,124	57.4%	97.6%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,350	100.0%	66.9%	168	12.4%	92.8%	236	17.4%	34.5%	946	70.0%	82.1%
Low Priority	307	100.0%	15.2%	12	3.9%	6.6%	133	43.3%	19.4%	162	52.7%	14.0%
Priority Level Missing	359	100.0%	17.8%	1	0.2%	0.5%	315	87.7%	46.0%	43	11.9%	3.7%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 2 - VA Healthcare Network Upstate New York

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,385	100.0%	100.0%	141	10.1%	100.0%	404	29.1%	100.0%	840	60.6%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	798	100.0%	57.6%	78	9.7%	55.3%	225	28.1%	55.6%	495	62.0%	58.9%
Urban	568	100.0%	41.0%	58	10.2%	41.1%	178	31.3%	44.0%	332	58.4%	39.5%
Zip Invalid/Missing	19	100.0%	1.3%	5	26.3%	3.5%	1	5.2%	0.2%	13	68.4%	1.5%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,332	100.0%	96.1%	134	10.0%	95.0%	390	29.2%	96.5%	808	60.6%	96.1%
> 30 miles	34	100.0%	2.4%	2	5.8%	1.4%	13	38.2%	3.2%	19	55.8%	2.2%
Zip Invalid/Missing	19	100.0%	1.3%	5	26.3%	3.5%	1	5.2%	0.2%	13	68.4%	1.5%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	780	100.0%	56.3%	100	12.8%	70.9%	230	29.4%	56.9%	450	57.6%	53.5%
> 30 miles	586	100.0%	42.3%	36	6.1%	25.5%	173	29.5%	42.8%	377	64.3%	44.8%
Zip Invalid/Missing	19	100.0%	1.3%	5	26.3%	3.5%	1	5.2%	0.2%	13	68.4%	1.5%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	25	100.0%	1.8%	5	20.0%	3.5%	3	12.0%	0.7%	17	68.0%	2.0%
50-64 years	103	100.0%	7.4%	16	15.5%	11.3%	21	20.3%	5.1%	66	64.0%	7.8%
≥ 65 years	1,257	100.0%	90.7%	120	9.5%	85.1%	380	30.2%	94.0%	757	60.2%	90.1%
GENDER ¹⁶												
Female	43	100.0%	3.1%	2	4.6%	1.4%	5	11.6%	1.2%	36	83.7%	4.2%
Male	1,342	100.0%	96.8%	139	10.3%	98.5%	399	29.7%	98.7%	804	59.9%	95.7%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	948	100.0%	68.4%	129	13.6%	91.4%	179	18.8%	44.3%	640	67.5%	76.1%
Low Priority	287	100.0%	20.7%	11	3.8%	7.8%	119	41.4%	29.4%	157	54.7%	18.6%
Priority Level Missing	150	100.0%	10.8%	1	0.6%	0.7%	106	70.6%	26.2%	43	28.6%	5.1%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 3 - VA NY/NJ Veterans Healthcare Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,215	100.0%	100.0%	186	8.3%	100.0%	874	39.4%	100.0%	1,155	52.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	192	100.0%	8.6%	18	9.3%	9.6%	68	35.4%	7.7%	106	55.2%	9.1%
Urban	2,018	100.0%	91.1%	168	8.3%	90.3%	806	39.9%	92.2%	1,044	51.7%	90.3%
Zip Invalid/Missing	5	100.0%	0.2%	0	0	0	0	0	0	5	100.0%	0.4%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,210	100.0%	99.7%	186	8.4%	100.0%	874	39.5%	100.0%	1,150	52.0%	99.5%
Zip Invalid/Missing	5	100.0%	0.2%	0	0	0	0	0	0	5	100.0%	0.4%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,018	100.0%	91.1%	175	8.6%	94.0%	793	39.2%	90.7%	1,050	52.0%	90.9%
> 30 miles	192	100.0%	8.6%	11	5.7%	5.9%	81	42.1%	9.2%	100	52.0%	8.6%
Zip Invalid/Missing	5	100.0%	0.2%	0	0	0	0	0	0	5	100.0%	0.4%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	28	100.0%	1.2%	7	25.0%	3.7%	5	17.8%	0.5%	16	57.1%	1.3%
50-64 years	134	100.0%	6.0%	27	20.1%	14.5%	38	28.3%	4.3%	69	51.4%	5.9%
≥ 65 years	2,051	100.0%	92.5%	151	7.3%	81.1%	830	40.4%	94.9%	1,070	52.1%	92.6%
Invalid/Missing Age	2	100.0%	0.0%	1	50.0%	0.5%	1	50.0%	0.1%	0	0	0
GENDER ¹⁶												
Female	39	100.0%	1.7%	3	7.6%	1.6%	18	46.1%	2.0%	18	46.1%	1.5%
Male	2,176	100.0%	98.2%	183	8.4%	98.3%	856	39.3%	97.9%	1,137	52.2%	98.4%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,217	100.0%	54.9%	154	12.6%	82.7%	325	26.7%	37.1%	738	60.6%	63.8%
Low Priority	749	100.0%	33.8%	30	4.0%	16.1%	330	44.0%	37.7%	389	51.9%	33.6%
Priority Level Missing	249	100.0%	11.2%	2	0.8%	1.0%	219	87.9%	25.0%	28	11.2%	2.4%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 4 - VA Stars & Stripes Healthcare Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,319	100.0%	100.0%	177	7.6%	100.0%	828	35.7%	100.0%	1,314	56.6%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,132	100.0%	48.8%	80	7.0%	45.1%	399	35.2%	48.1%	653	57.6%	49.6%
Urban	1,172	100.0%	50.5%	95	8.1%	53.6%	427	36.4%	51.5%	650	55.4%	49.4%
Zip Invalid/Missing	15	100.0%	0.6%	2	13.3%	1.1%	2	13.3%	0.2%	11	73.3%	0.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,244	100.0%	96.7%	171	7.6%	96.6%	805	35.8%	97.2%	1,268	56.5%	96.4%
> 30 miles	60	100.0%	2.5%	4	6.6%	2.2%	21	35.0%	2.5%	35	58.3%	2.6%
Zip Invalid/Missing	15	100.0%	0.6%	2	13.3%	1.1%	2	13.3%	0.2%	11	73.3%	0.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,506	100.0%	64.9%	141	9.3%	79.6%	532	35.3%	64.2%	833	55.3%	63.3%
> 30 miles	798	100.0%	34.4%	34	4.2%	19.2%	294	36.8%	35.5%	470	58.8%	35.7%
Zip Invalid/Missing	15	100.0%	0.6%	2	13.3%	1.1%	2	13.3%	0.2%	11	73.3%	0.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	31	100.0%	1.3%	12	38.7%	6.7%	1	3.2%	0.1%	18	58.0%	1.3%
50-64 years	141	100.0%	6.0%	27	19.1%	15.2%	27	19.1%	3.2%	87	61.7%	6.6%
≥ 65 years	2,147	100.0%	92.5%	138	6.4%	77.9%	800	37.2%	96.6%	1,209	56.3%	92.0%
GENDER ¹⁶												
Female	41	100.0%	1.7%	3	7.3%	1.6%	15	36.5%	1.8%	23	56.0%	1.7%
Male	2,278	100.0%	98.2%	174	7.6%	98.3%	813	35.6%	98.1%	1,291	56.6%	98.2%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,537	100.0%	66.2%	161	10.4%	90.9%	344	22.3%	41.5%	1,032	67.1%	78.5%
Low Priority	487	100.0%	21.0%	14	2.8%	7.9%	204	41.8%	24.6%	269	55.2%	20.4%
Priority Level Missing	295	100.0%	12.7%	2	0.6%	1.1%	280	94.9%	33.8%	13	4.4%	0.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 5 - VA Capital Health Care Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	822	100.0%	100.0%	153	18.6%	100.0%	223	27.1%	100.0%	446	54.2%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	298	100.0%	36.2%	44	14.7%	28.7%	76	25.5%	34.0%	178	59.7%	39.9%
Urban	491	100.0%	59.7%	91	18.5%	59.4%	146	29.7%	65.4%	254	51.7%	56.9%
Zip Invalid/Missing	33	100.0%	4.0%	18	54.5%	11.7%	1	3.0%	0.4%	14	42.4%	3.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	776	100.0%	94.4%	135	17.3%	88.2%	218	28.0%	97.7%	423	54.5%	94.8%
> 30 miles	13	100.0%	1.5%	0	0	0	4	30.7%	1.7%	9	69.2%	2.0%
Zip Invalid/Missing	33	100.0%	4.0%	18	54.5%	11.7%	1	3.0%	0.4%	14	42.4%	3.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	596	100.0%	72.5%	119	19.9%	77.7%	166	27.8%	74.4%	311	52.1%	69.7%
> 30 miles	193	100.0%	23.4%	16	8.2%	10.4%	56	29.0%	25.1%	121	62.6%	27.1%
Zip Invalid/Missing	33	100.0%	4.0%	18	54.5%	11.7%	1	3.0%	0.4%	14	42.4%	3.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	15	100.0%	1.8%	7	46.6%	4.5%	0	0	0	8	53.3%	1.7%
50-64 years	53	100.0%	6.4%	20	37.7%	13.0%	5	9.4%	2.2%	28	52.8%	6.2%
≥ 65 years	754	100.0%	91.7%	126	16.7%	82.3%	218	28.9%	97.7%	410	54.3%	91.9%
GENDER ¹⁶												
Female	11	100.0%	1.3%	0	0	0	5	45.4%	2.2%	6	54.5%	1.3%
Male	811	100.0%	98.6%	153	18.8%	100.0%	218	26.8%	97.7%	440	54.2%	98.6%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	609	100.0%	74.0%	145	23.8%	94.7%	82	13.4%	36.7%	382	62.7%	85.6%
Low Priority	97	100.0%	11.8%	5	5.1%	3.2%	35	36.0%	15.6%	57	58.7%	12.7%
Priority Level Missing	116	100.0%	14.1%	3	2.5%	1.9%	106	91.3%	47.5%	7	6.0%	1.5%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 6 - The Mid-Atlantic Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,945	100.0%	100.0%	248	12.7%	100.0%	577	29.6%	100.0%	1,120	57.5%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,185	100.0%	60.9%	136	11.4%	54.8%	371	31.3%	64.2%	678	57.2%	60.5%
Urban	729	100.0%	37.4%	107	14.6%	43.1%	206	28.2%	35.7%	416	57.0%	37.1%
Zip Invalid/Missing	31	100.0%	1.5%	5	16.1%	2.0%	0	0	0	26	83.8%	2.3%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,438	100.0%	73.9%	192	13.3%	77.4%	437	30.3%	75.7%	809	56.2%	72.2%
> 30 miles	476	100.0%	24.4%	51	10.7%	20.5%	140	29.4%	24.2%	285	59.8%	25.4%
Zip Invalid/Missing	31	100.0%	1.5%	5	16.1%	2.0%	0	0	0	26	83.8%	2.3%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	926	100.0%	47.6%	144	15.5%	58.0%	270	29.1%	46.7%	512	55.2%	45.7%
> 30 miles	988	100.0%	50.7%	99	10.0%	39.9%	307	31.0%	53.2%	582	58.9%	51.9%
Zip Invalid/Missing	31	100.0%	1.5%	5	16.1%	2.0%	0	0	0	26	83.8%	2.3%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	39	100.0%	2.0%	13	33.3%	5.2%	5	12.8%	0.8%	21	53.8%	1.8%
50-64 years	173	100.0%	8.8%	38	21.9%	15.3%	37	21.3%	6.4%	98	56.6%	8.7%
≥ 65 years	1,733	100.0%	89.1%	197	11.3%	79.4%	535	30.8%	92.7%	1,001	57.7%	89.3%
GENDER ¹⁶												
Female	40	100.0%	2.0%	5	12.5%	2.0%	10	25.0%	1.7%	25	62.5%	2.2%
Male	1,905	100.0%	97.9%	243	12.7%	97.9%	567	29.7%	98.2%	1,095	57.4%	97.7%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,443	100.0%	74.1%	235	16.2%	94.7%	237	16.4%	41.0%	971	67.2%	86.6%
Low Priority	270	100.0%	13.8%	12	4.4%	4.8%	128	47.4%	22.1%	130	48.1%	11.6%
Priority Level Missing	232	100.0%	11.9%	1	0.4%	0.4%	212	91.3%	36.7%	19	8.1%	1.6%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 7 - The Atlanta Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,219	100.0%	100.0%	270	12.1%	100.0%	627	28.2%	100.0%	1,322	59.5%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,272	100.0%	57.3%	130	10.2%	48.1%	369	29.0%	58.8%	773	60.7%	58.4%
Urban	869	100.0%	39.1%	118	13.5%	43.7%	254	29.2%	40.5%	497	57.1%	37.5%
Zip Invalid/Missing	78	100.0%	3.5%	22	28.2%	8.1%	4	5.1%	0.6%	52	66.6%	3.9%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,513	100.0%	68.1%	185	12.2%	68.5%	437	28.8%	69.6%	891	58.8%	67.3%
> 30 miles	628	100.0%	28.3%	63	10.0%	23.3%	186	29.6%	29.6%	379	60.3%	28.6%
Zip Invalid/Missing	78	100.0%	3.5%	22	28.2%	8.1%	4	5.1%	0.6%	52	66.6%	3.9%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	764	100.0%	34.4%	133	17.4%	49.2%	195	25.5%	31.1%	436	57.0%	32.9%
> 30 miles	1,377	100.0%	62.0%	115	8.3%	42.5%	428	31.0%	68.2%	834	60.5%	63.0%
Zip Invalid/Missing	78	100.0%	3.5%	22	28.2%	8.1%	4	5.1%	0.6%	52	66.6%	3.9%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	50	100.0%	2.2%	17	34.0%	6.2%	5	10.0%	0.7%	28	56.0%	2.1%
50-64 years	229	100.0%	10.3%	54	23.5%	20.0%	45	19.6%	7.1%	130	56.7%	9.8%
≥ 65 years	1,940	100.0%	87.4%	199	10.2%	73.7%	577	29.7%	92.0%	1,164	60.0%	88.0%
GENDER ¹⁶												
Female	45	100.0%	2.0%	1	2.2%	0.3%	21	46.6%	3.3%	23	51.1%	1.7%
Male	2,174	100.0%	97.9%	269	12.3%	99.6%	606	27.8%	96.6%	1,299	59.7%	98.2%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,663	100.0%	74.9%	262	15.7%	97.0%	274	16.4%	43.7%	1,127	67.7%	85.2%
Low Priority	260	100.0%	11.7%	8	3.0%	2.9%	86	33.0%	13.7%	166	63.8%	12.5%
Priority Level Missing	296	100.0%	13.3%	0	0	0	267	90.2%	42.5%	29	9.7%	2.1%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 8 - VA Sunshine Healthcare Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,658	100.0%	100.0%	329	12.3%	100.0%	866	32.5%	100.0%	1,463	55.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,073	100.0%	40.3%	153	14.2%	46.5%	310	28.8%	35.7%	610	56.8%	41.6%
Urban	1,520	100.0%	57.1%	161	10.5%	48.9%	550	36.1%	63.5%	809	53.2%	55.2%
Zip Invalid/Missing	65	100.0%	2.4%	15	23.0%	4.5%	6	9.2%	0.6%	44	67.6%	3.0%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,412	100.0%	90.7%	295	12.2%	89.6%	803	33.2%	92.7%	1,314	54.4%	89.8%
> 30 miles	181	100.0%	6.8%	19	10.4%	5.7%	57	31.4%	6.5%	105	58.0%	7.1%
Zip Invalid/Missing	65	100.0%	2.4%	15	23.0%	4.5%	6	9.2%	0.6%	44	67.6%	3.0%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,196	100.0%	44.9%	204	17.0%	62.0%	382	31.9%	44.1%	610	51.0%	41.6%
> 30 miles	1,397	100.0%	52.5%	110	7.8%	33.4%	478	34.2%	55.1%	809	57.9%	55.2%
Zip Invalid/Missing	65	100.0%	2.4%	15	23.0%	4.5%	6	9.2%	0.6%	44	67.6%	3.0%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	42	100.0%	1.5%	15	35.7%	4.5%	4	9.5%	0.4%	23	54.7%	1.5%
50-64 years	228	100.0%	8.5%	62	27.1%	18.8%	34	14.9%	3.9%	132	57.8%	9.0%
≥ 65 years	2,388	100.0%	89.8%	252	10.5%	76.5%	828	34.6%	95.6%	1,308	54.7%	89.4%
GENDER ¹⁶												
Female	87	100.0%	3.2%	5	5.7%	1.5%	43	49.4%	4.9%	39	44.8%	2.6%
Male	2,571	100.0%	96.7%	324	12.6%	98.4%	823	32.0%	95.0%	1,424	55.3%	97.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,811	100.0%	68.1%	313	17.2%	95.1%	334	18.4%	38.5%	1,164	64.2%	79.5%
Low Priority	492	100.0%	18.5%	11	2.2%	3.3%	222	45.1%	25.6%	259	52.6%	17.7%
Priority Level Missing	355	100.0%	13.3%	5	1.4%	1.5%	310	87.3%	35.7%	40	11.2%	2.7%

Note: See attached footnotes for variable definitions and descriptions.
VIRc, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 9 - VA Mid South Healthcare Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,024	100.0%	100.0%	277	13.6%	100.0%	503	24.8%	100.0%	1,244	61.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,328	100.0%	65.6%	141	10.6%	50.9%	355	26.7%	70.5%	832	62.6%	66.8%
Urban	622	100.0%	30.7%	119	19.1%	42.9%	148	23.7%	29.4%	355	57.0%	28.5%
Zip Invalid/Missing	74	100.0%	3.6%	17	22.9%	6.1%	0	0	0	57	77.0%	4.5%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,324	100.0%	65.4%	199	15.0%	71.8%	322	24.3%	64.0%	803	60.6%	64.5%
> 30 miles	626	100.0%	30.9%	61	9.7%	22.0%	181	28.9%	35.9%	384	61.3%	30.8%
Zip Invalid/Missing	74	100.0%	3.6%	17	22.9%	6.1%	0	0	0	57	77.0%	4.5%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	751	100.0%	37.1%	154	20.5%	55.5%	155	20.6%	30.8%	442	58.8%	35.5%
> 30 miles	1,199	100.0%	59.2%	106	8.8%	38.2%	348	29.0%	69.1%	745	62.1%	59.8%
Zip Invalid/Missing	74	100.0%	3.6%	17	22.9%	6.1%	0	0	0	57	77.0%	4.5%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	31	100.0%	1.5%	11	35.4%	3.9%	4	12.9%	0.7%	16	51.6%	1.2%
50-64 years	201	100.0%	9.9%	44	21.8%	15.8%	37	18.4%	7.3%	120	59.7%	9.6%
≥ 65 years	1,792	100.0%	88.5%	222	12.3%	80.1%	462	25.7%	91.8%	1,108	61.8%	89.0%
GENDER ¹⁶												
Female	35	100.0%	1.7%	2	5.7%	0.7%	14	40.0%	2.7%	19	54.2%	1.5%
Male	1,989	100.0%	98.2%	275	13.8%	99.2%	489	24.5%	97.2%	1,225	61.5%	98.4%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,594	100.0%	78.7%	270	16.9%	97.4%	247	15.4%	49.1%	1,077	67.5%	86.5%
Low Priority	229	100.0%	11.3%	7	3.0%	2.5%	74	32.3%	14.7%	148	64.6%	11.8%
Priority Level Missing	201	100.0%	9.9%	0	0	0	182	90.5%	36.1%	19	9.4%	1.5%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 10 - VA Healthcare System of Ohio

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,306	100.0%	100.0%	158	12.0%	100.0%	428	32.7%	100.0%	720	55.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	597	100.0%	45.7%	53	8.8%	33.5%	180	30.1%	42.0%	364	60.9%	50.5%
Urban	688	100.0%	52.6%	100	14.5%	63.2%	245	35.6%	57.2%	343	49.8%	47.6%
Zip Invalid/Missing	21	100.0%	1.6%	5	23.8%	3.1%	3	14.2%	0.7%	13	61.9%	1.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,214	100.0%	92.9%	146	12.0%	92.4%	401	33.0%	93.6%	667	54.9%	92.6%
> 30 miles	71	100.0%	5.4%	7	9.8%	4.4%	24	33.8%	5.6%	40	56.3%	5.5%
Zip Invalid/Missing	21	100.0%	1.6%	5	23.8%	3.1%	3	14.2%	0.7%	13	61.9%	1.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	600	100.0%	45.9%	103	17.1%	65.1%	209	34.8%	48.8%	288	48.0%	40.0%
> 30 miles	685	100.0%	52.4%	50	7.2%	31.6%	216	31.5%	50.4%	419	61.1%	58.1%
Zip Invalid/Missing	21	100.0%	1.6%	5	23.8%	3.1%	3	14.2%	0.7%	13	61.9%	1.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	27	100.0%	2.0%	6	22.2%	3.7%	3	11.1%	0.7%	18	66.6%	2.5%
50-64 years	105	100.0%	8.0%	25	23.8%	15.8%	26	24.7%	6.0%	54	51.4%	7.5%
≥ 65 years	1,174	100.0%	89.8%	127	10.8%	80.3%	399	33.9%	93.2%	648	55.1%	90.0%
GENDER ¹⁶												
Female	18	100.0%	1.3%	4	22.2%	2.5%	7	38.8%	1.6%	7	38.8%	0.9%
Male	1,288	100.0%	98.6%	154	11.9%	97.4%	421	32.6%	98.3%	713	55.3%	99.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	958	100.0%	73.3%	152	15.8%	96.2%	214	22.3%	50.0%	592	61.7%	82.2%
Low Priority	205	100.0%	15.6%	6	2.9%	3.7%	74	36.0%	17.2%	125	60.9%	17.3%
Priority Level Missing	143	100.0%	10.9%	0	0	0	140	97.9%	32.7%	3	2.0%	0.4%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 11 - Veterans In Partnership

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,935	100.0%	100.0%	192	9.9%	100.0%	575	29.7%	100.0%	1,168	60.3%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	902	100.0%	46.6%	93	10.3%	48.4%	263	29.1%	45.7%	546	60.5%	46.7%
Urban	1,013	100.0%	52.3%	94	9.2%	48.9%	310	30.6%	53.9%	609	60.1%	52.1%
Zip Invalid/Missing	20	100.0%	1.0%	5	25.0%	2.6%	2	10.0%	0.3%	13	65.0%	1.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,630	100.0%	84.2%	165	10.1%	85.9%	487	29.8%	84.6%	978	60.0%	83.7%
> 30 miles	285	100.0%	14.7%	22	7.7%	11.4%	86	30.1%	14.9%	177	62.1%	15.1%
Zip Invalid/Missing	20	100.0%	1.0%	5	25.0%	2.6%	2	10.0%	0.3%	13	65.0%	1.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	869	100.0%	44.9%	119	13.6%	61.9%	268	30.8%	46.6%	482	55.4%	41.2%
> 30 miles	1,046	100.0%	54.0%	68	6.5%	35.4%	305	29.1%	53.0%	673	64.3%	57.6%
Zip Invalid/Missing	20	100.0%	1.0%	5	25.0%	2.6%	2	10.0%	0.3%	13	65.0%	1.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	32	100.0%	1.6%	12	37.5%	6.2%	2	6.2%	0.3%	18	56.2%	1.5%
50-64 years	141	100.0%	7.2%	29	20.5%	15.1%	36	25.5%	6.2%	76	53.9%	6.5%
≥ 65 years	1,762	100.0%	91.0%	151	8.5%	78.6%	537	30.4%	93.3%	1,074	60.9%	91.9%
GENDER ¹⁶												
Female	26	100.0%	1.3%	1	3.8%	0.5%	9	34.6%	1.5%	16	61.5%	1.3%
Male	1,909	100.0%	98.6%	191	10.0%	99.4%	566	29.6%	98.4%	1,152	60.3%	98.6%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,381	100.0%	71.3%	178	12.8%	92.7%	236	17.0%	41.0%	967	70.0%	82.7%
Low Priority	305	100.0%	15.7%	12	3.9%	6.2%	107	35.0%	18.6%	186	60.9%	15.9%
Priority Level Missing	249	100.0%	12.8%	2	0.8%	1.0%	232	93.1%	40.3%	15	6.0%	1.2%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 12 - The Great Lakes Health Care System

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,762	100.0%	100.0%	236	13.3%	100.0%	503	28.5%	100.0%	1,023	58.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	575	100.0%	32.6%	55	9.5%	23.3%	155	26.9%	30.8%	365	63.4%	35.6%
Urban	1,170	100.0%	66.4%	178	15.2%	75.4%	344	29.4%	68.3%	648	55.3%	63.3%
Zip Invalid/Missing	17	100.0%	0.9%	3	17.6%	1.2%	4	23.5%	0.7%	10	58.8%	0.9%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,635	100.0%	92.7%	224	13.7%	94.9%	471	28.8%	93.6%	940	57.4%	91.8%
> 30 miles	110	100.0%	6.2%	9	8.1%	3.8%	28	25.4%	5.5%	73	66.3%	7.1%
Zip Invalid/Missing	17	100.0%	0.9%	3	17.6%	1.2%	4	23.5%	0.7%	10	58.8%	0.9%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,148	100.0%	65.1%	191	16.6%	80.9%	325	28.3%	64.6%	632	55.0%	61.7%
> 30 miles	597	100.0%	33.8%	42	7.0%	17.7%	174	29.1%	34.5%	381	63.8%	37.2%
Zip Invalid/Missing	17	100.0%	0.9%	3	17.6%	1.2%	4	23.5%	0.7%	10	58.8%	0.9%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	21	100.0%	1.1%	9	42.8%	3.8%	2	9.5%	0.3%	10	47.6%	0.9%
50-64 years	108	100.0%	6.1%	32	29.6%	13.5%	20	18.5%	3.9%	56	51.8%	5.4%
≥ 65 years	1,633	100.0%	92.6%	195	11.9%	82.6%	481	29.4%	95.6%	957	58.6%	93.5%
GENDER ¹⁶												
Female	60	100.0%	3.4%	4	6.6%	1.6%	19	31.6%	3.7%	37	61.6%	3.6%
Male	1,702	100.0%	96.5%	232	13.6%	98.3%	484	28.4%	96.2%	986	57.9%	96.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,208	100.0%	68.5%	219	18.1%	92.7%	223	18.4%	44.3%	766	63.4%	74.8%
Low Priority	361	100.0%	20.4%	15	4.1%	6.3%	135	37.3%	26.8%	211	58.4%	20.6%
Priority Level Missing	193	100.0%	10.9%	2	1.0%	0.8%	145	75.1%	28.8%	46	23.8%	4.4%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 13 - VA Upper Midwest Health Care Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,027	100.0%	100.0%	142	13.8%	100.0%	246	23.9%	100.0%	639	62.2%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	675	100.0%	65.7%	82	12.1%	57.7%	156	23.1%	63.4%	437	64.7%	68.3%
Urban	321	100.0%	31.2%	49	15.2%	34.5%	90	28.0%	36.5%	182	56.6%	28.4%
Zip Invalid/Missing	31	100.0%	3.0%	11	35.4%	7.7%	0	0	0	20	64.5%	3.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	627	100.0%	61.0%	97	15.4%	68.3%	152	24.2%	61.7%	378	60.2%	59.1%
> 30 miles	369	100.0%	35.9%	34	9.2%	23.9%	94	25.4%	38.2%	241	65.3%	37.7%
Zip Invalid/Missing	31	100.0%	3.0%	11	35.4%	7.7%	0	0	0	20	64.5%	3.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	365	100.0%	35.5%	68	18.6%	47.8%	86	23.5%	34.9%	211	57.8%	33.0%
> 30 miles	631	100.0%	61.4%	63	9.9%	44.3%	160	25.3%	65.0%	408	64.6%	63.8%
Zip Invalid/Missing	31	100.0%	3.0%	11	35.4%	7.7%	0	0	0	20	64.5%	3.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	14	100.0%	1.3%	6	42.8%	4.2%	1	7.1%	0.4%	7	50.0%	1.0%
50-64 years	76	100.0%	7.4%	19	25.0%	13.3%	8	10.5%	3.2%	49	64.4%	7.6%
≥ 65 years	937	100.0%	91.2%	117	12.4%	82.3%	237	25.2%	96.3%	583	62.2%	91.2%
GENDER ¹⁶												
Female	76	100.0%	7.4%	14	18.4%	9.8%	17	22.3%	6.9%	45	59.2%	7.0%
Male	951	100.0%	92.5%	128	13.4%	90.1%	229	24.0%	93.0%	594	62.4%	92.9%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	668	100.0%	65.0%	120	17.9%	84.5%	85	12.7%	34.5%	463	69.3%	72.4%
Low Priority	213	100.0%	20.7%	10	4.6%	7.0%	77	36.1%	31.3%	126	59.1%	19.7%
Priority Level Missing	146	100.0%	14.2%	12	8.2%	8.4%	84	57.5%	34.1%	50	34.2%	7.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 14 - Central Plains Health Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	861	100.0%	100.0%	65	7.5%	100.0%	222	25.7%	100.0%	574	66.6%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	636	100.0%	73.8%	37	5.8%	56.9%	165	25.9%	74.3%	434	68.2%	75.6%
Urban	220	100.0%	25.5%	27	12.2%	41.5%	57	25.9%	25.6%	136	61.8%	23.6%
Zip Invalid/Missing	5	100.0%	0.5%	1	20.0%	1.5%	0	0	0	4	80.0%	0.6%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	588	100.0%	68.2%	47	7.9%	72.3%	163	27.7%	73.4%	378	64.2%	65.8%
> 30 miles	268	100.0%	31.1%	17	6.3%	26.1%	59	22.0%	26.5%	192	71.6%	33.4%
Zip Invalid/Missing	5	100.0%	0.5%	1	20.0%	1.5%	0	0	0	4	80.0%	0.6%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	217	100.0%	25.2%	30	13.8%	46.1%	58	26.7%	26.1%	129	59.4%	22.4%
> 30 miles	639	100.0%	74.2%	34	5.3%	52.3%	164	25.6%	73.8%	441	69.0%	76.8%
Zip Invalid/Missing	5	100.0%	0.5%	1	20.0%	1.5%	0	0	0	4	80.0%	0.6%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	9	100.0%	1.0%	1	11.1%	1.5%	0	0	0	8	88.8%	1.3%
50-64 years	48	100.0%	5.5%	7	14.5%	10.7%	10	20.8%	4.5%	31	64.5%	5.4%
≥ 65 years	803	100.0%	93.2%	57	7.0%	87.6%	211	26.2%	95.0%	535	66.6%	93.2%
Invalid/Missing Age	1	100.0%	0.1%	0	0	0	1	100.0%	0.4%	0	0	0
GENDER ¹⁶												
Female	15	100.0%	1.7%	1	6.6%	1.5%	10	66.6%	4.5%	4	26.6%	0.6%
Male	846	100.0%	98.2%	64	7.5%	98.4%	212	25.0%	95.4%	570	67.3%	99.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	557	100.0%	64.6%	61	10.9%	93.8%	77	13.8%	34.6%	419	75.2%	72.9%
Low Priority	233	100.0%	27.0%	4	1.7%	6.1%	81	34.7%	36.4%	148	63.5%	25.7%
Priority Level Missing	71	100.0%	8.2%	0	0	0	64	90.1%	28.8%	7	9.8%	1.2%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 15 - VA Heartland Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,680	100.0%	100.0%	235	13.9%	100.0%	379	22.5%	100.0%	1,066	63.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,182	100.0%	70.3%	142	12.0%	60.4%	255	21.5%	67.2%	785	66.4%	73.6%
Urban	469	100.0%	27.9%	86	18.3%	36.5%	122	26.0%	32.1%	261	55.6%	24.4%
Zip Invalid/Missing	29	100.0%	1.7%	7	24.1%	2.9%	2	6.8%	0.5%	20	68.9%	1.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,184	100.0%	70.4%	187	15.7%	79.5%	262	22.1%	69.1%	735	62.0%	68.9%
> 30 miles	467	100.0%	27.7%	41	8.7%	17.4%	115	24.6%	30.3%	311	66.5%	29.1%
Zip Invalid/Missing	29	100.0%	1.7%	7	24.1%	2.9%	2	6.8%	0.5%	20	68.9%	1.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	645	100.0%	38.3%	129	20.0%	54.8%	149	23.1%	39.3%	367	56.8%	34.4%
> 30 miles	1,006	100.0%	59.8%	99	9.8%	42.1%	228	22.6%	60.1%	679	67.4%	63.6%
Zip Invalid/Missing	29	100.0%	1.7%	7	24.1%	2.9%	2	6.8%	0.5%	20	68.9%	1.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	26	100.0%	1.5%	9	34.6%	3.8%	4	15.3%	1.0%	13	50.0%	1.2%
50-64 years	138	100.0%	8.2%	48	34.7%	20.4%	15	10.8%	3.9%	75	54.3%	7.0%
≥ 65 years	1,516	100.0%	90.2%	178	11.7%	75.7%	360	23.7%	94.9%	978	64.5%	91.7%
GENDER ¹⁶												
Female	22	100.0%	1.3%	3	13.6%	1.2%	6	27.2%	1.5%	13	59.0%	1.2%
Male	1,658	100.0%	98.6%	232	13.9%	98.7%	373	22.4%	98.4%	1,053	63.5%	98.7%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,270	100.0%	75.5%	225	17.7%	95.7%	171	13.4%	45.1%	874	68.8%	81.9%
Low Priority	261	100.0%	15.5%	8	3.0%	3.4%	71	27.2%	18.7%	182	69.7%	17.0%
Priority Level Missing	149	100.0%	8.8%	2	1.3%	0.8%	137	91.9%	36.1%	10	6.7%	0.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 16 - South Central VA Healthcare Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	3,172	100.0%	100.0%	462	14.5%	100.0%	811	25.5%	100.0%	1,899	59.8%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,951	100.0%	61.5%	228	11.6%	49.3%	495	25.3%	61.0%	1,228	62.9%	64.6%
Urban	1,162	100.0%	36.6%	217	18.6%	46.9%	313	26.9%	38.5%	632	54.3%	33.2%
Zip Invalid/Missing	59	100.0%	1.8%	17	28.8%	3.6%	3	5.0%	0.3%	39	66.1%	2.0%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,958	100.0%	61.7%	331	16.9%	71.6%	502	25.6%	61.8%	1,125	57.4%	59.2%
> 30 miles	1,155	100.0%	36.4%	114	9.8%	24.6%	306	26.4%	37.7%	735	63.6%	38.7%
Zip Invalid/Missing	59	100.0%	1.8%	17	28.8%	3.6%	3	5.0%	0.3%	39	66.1%	2.0%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	979	100.0%	30.8%	253	25.8%	54.7%	222	22.6%	27.3%	504	51.4%	26.5%
> 30 miles	2,134	100.0%	67.2%	192	8.9%	41.5%	586	27.4%	72.2%	1,356	63.5%	71.4%
Zip Invalid/Missing	59	100.0%	1.8%	17	28.8%	3.6%	3	5.0%	0.3%	39	66.1%	2.0%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	47	100.0%	1.4%	17	36.1%	3.6%	3	6.3%	0.3%	27	57.4%	1.4%
50-64 years	307	100.0%	9.6%	80	26.0%	17.3%	43	14.0%	5.3%	184	59.9%	9.6%
≥ 65 years	2,818	100.0%	88.8%	365	12.9%	79.0%	765	27.1%	94.3%	1,688	59.9%	88.8%
GENDER ¹⁶												
Female	51	100.0%	1.6%	6	11.7%	1.2%	23	45.0%	2.8%	22	43.1%	1.1%
Male	3,121	100.0%	98.3%	456	14.6%	98.7%	788	25.2%	97.1%	1,877	60.1%	98.8%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	2,581	100.0%	81.3%	447	17.3%	96.7%	411	15.9%	50.6%	1,723	66.7%	90.7%
Low Priority	272	100.0%	8.5%	13	4.7%	2.8%	106	38.9%	13.0%	153	56.2%	8.0%
Priority Level Missing	319	100.0%	10.0%	2	0.6%	0.4%	294	92.1%	36.2%	23	7.2%	1.2%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 17 - VA Heart of Texas Health Care Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,254	100.0%	100.0%	197	15.7%	100.0%	293	23.3%	100.0%	764	60.9%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	701	100.0%	55.9%	107	15.2%	54.3%	154	21.9%	52.5%	440	62.7%	57.5%
Urban	546	100.0%	43.5%	89	16.3%	45.1%	138	25.2%	47.0%	319	58.4%	41.7%
Zip Invalid/Missing	7	100.0%	0.5%	1	14.2%	0.5%	1	14.2%	0.3%	5	71.4%	0.6%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,108	100.0%	88.3%	182	16.4%	92.3%	264	23.8%	90.1%	662	59.7%	86.6%
> 30 miles	139	100.0%	11.0%	14	10.0%	7.1%	28	20.1%	9.5%	97	69.7%	12.6%
Zip Invalid/Missing	7	100.0%	0.5%	1	14.2%	0.5%	1	14.2%	0.3%	5	71.4%	0.6%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	521	100.0%	41.5%	113	21.6%	57.3%	123	23.6%	41.9%	285	54.7%	37.3%
> 30 miles	726	100.0%	57.8%	83	11.4%	42.1%	169	23.2%	57.6%	474	65.2%	62.0%
Zip Invalid/Missing	7	100.0%	0.5%	1	14.2%	0.5%	1	14.2%	0.3%	5	71.4%	0.6%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	25	100.0%	1.9%	8	32.0%	4.0%	2	8.0%	0.6%	15	60.0%	1.9%
50-64 years	104	100.0%	8.2%	26	25.0%	13.1%	16	15.3%	5.4%	62	59.6%	8.1%
≥ 65 years	1,125	100.0%	89.7%	163	14.4%	82.7%	275	24.4%	93.8%	687	61.0%	89.9%
GENDER ¹⁶												
Female	27	100.0%	2.1%	2	7.4%	1.0%	10	37.0%	3.4%	15	55.5%	1.9%
Male	1,227	100.0%	97.8%	195	15.8%	98.9%	283	23.0%	96.5%	749	61.0%	98.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	998	100.0%	79.5%	188	18.8%	95.4%	141	14.1%	48.1%	669	67.0%	87.5%
Low Priority	124	100.0%	9.8%	9	7.2%	4.5%	40	32.2%	13.6%	75	60.4%	9.8%
Priority Level Missing	132	100.0%	10.5%	0	0	0	112	84.8%	38.2%	20	15.1%	2.6%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 18 - VA Southwest Health Care Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,117	100.0%	100.0%	165	14.7%	100.0%	254	22.7%	100.0%	698	62.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	590	100.0%	52.8%	69	11.6%	41.8%	131	22.2%	51.5%	390	66.1%	55.8%
Urban	492	100.0%	44.0%	78	15.8%	47.2%	121	24.5%	47.6%	293	59.5%	41.9%
Zip Invalid/Missing	35	100.0%	3.1%	18	51.4%	10.9%	2	5.7%	0.7%	15	42.8%	2.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	797	100.0%	71.3%	117	14.6%	70.9%	192	24.0%	75.5%	488	61.2%	69.9%
> 30 miles	285	100.0%	25.5%	30	10.5%	18.1%	60	21.0%	23.6%	195	68.4%	27.9%
Zip Invalid/Missing	35	100.0%	3.1%	18	51.4%	10.9%	2	5.7%	0.7%	15	42.8%	2.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	415	100.0%	37.1%	84	20.2%	50.9%	109	26.2%	42.9%	222	53.4%	31.8%
> 30 miles	667	100.0%	59.7%	63	9.4%	38.1%	143	21.4%	56.2%	461	69.1%	66.0%
Zip Invalid/Missing	35	100.0%	3.1%	18	51.4%	10.9%	2	5.7%	0.7%	15	42.8%	2.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	13	100.0%	1.1%	4	30.7%	2.4%	0	0	0	9	69.2%	1.2%
50-64 years	89	100.0%	7.9%	26	29.2%	15.7%	9	10.1%	3.5%	54	60.6%	7.7%
≥ 65 years	1,014	100.0%	90.7%	135	13.3%	81.8%	244	24.0%	96.0%	635	62.6%	90.9%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	1	100.0%	0.3%	0	0	0
GENDER ¹⁶												
Female	47	100.0%	4.2%	5	10.6%	3.0%	19	40.4%	7.4%	23	48.9%	3.2%
Male	1,070	100.0%	95.7%	160	14.9%	96.9%	235	21.9%	92.5%	675	63.0%	96.7%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	810	100.0%	72.5%	156	19.2%	94.5%	105	12.9%	41.3%	549	67.7%	78.6%
Low Priority	197	100.0%	17.6%	6	3.0%	3.6%	65	32.9%	25.5%	126	63.9%	18.0%
Priority Level Missing	110	100.0%	9.8%	3	2.7%	1.8%	84	76.3%	33.0%	23	20.9%	3.2%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 19 - Rocky Mountain Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	730	100.0%	100.0%	114	15.6%	100.0%	170	23.2%	100.0%	446	61.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	402	100.0%	55.0%	52	12.9%	45.6%	101	25.1%	59.4%	249	61.9%	55.8%
Urban	279	100.0%	38.2%	45	16.1%	39.4%	69	24.7%	40.5%	165	59.1%	36.9%
Zip Invalid/Missing	49	100.0%	6.7%	17	34.6%	14.9%	0	0	0	32	65.3%	7.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	482	100.0%	66.0%	75	15.5%	65.7%	125	25.9%	73.5%	282	58.5%	63.2%
> 30 miles	199	100.0%	27.2%	22	11.0%	19.2%	45	22.6%	26.4%	132	66.3%	29.5%
Zip Invalid/Missing	49	100.0%	6.7%	17	34.6%	14.9%	0	0	0	32	65.3%	7.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	197	100.0%	26.9%	48	24.3%	42.1%	41	20.8%	24.1%	108	54.8%	24.2%
> 30 miles	484	100.0%	66.3%	49	10.1%	42.9%	129	26.6%	75.8%	306	63.2%	68.6%
Zip Invalid/Missing	49	100.0%	6.7%	17	34.6%	14.9%	0	0	0	32	65.3%	7.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	14	100.0%	1.9%	3	21.4%	2.6%	2	14.2%	1.1%	9	64.2%	2.0%
50-64 years	59	100.0%	8.0%	20	33.8%	17.5%	8	13.5%	4.7%	31	52.5%	6.9%
≥ 65 years	657	100.0%	90.0%	91	13.8%	79.8%	160	24.3%	94.1%	406	61.7%	91.0%
GENDER ¹⁶												
Female	14	100.0%	1.9%	1	7.1%	0.8%	5	35.7%	2.9%	8	57.1%	1.7%
Male	716	100.0%	98.0%	113	15.7%	99.1%	165	23.0%	97.0%	438	61.1%	98.2%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	542	100.0%	74.2%	107	19.7%	93.8%	80	14.7%	47.0%	355	65.4%	79.5%
Low Priority	126	100.0%	17.2%	6	4.7%	5.2%	36	28.5%	21.1%	84	66.6%	18.8%
Priority Level Missing	62	100.0%	8.4%	1	1.6%	0.8%	54	87.0%	31.7%	7	11.2%	1.5%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 20 - Northwest Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,049	100.0%	100.0%	188	17.9%	100.0%	262	24.9%	100.0%	599	57.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	604	100.0%	57.5%	106	17.5%	56.3%	134	22.1%	51.1%	364	60.2%	60.7%
Urban	438	100.0%	41.7%	81	18.4%	43.0%	128	29.2%	48.8%	229	52.2%	38.2%
Zip Invalid/Missing	7	100.0%	0.6%	1	14.2%	0.5%	0	0	0	6	85.7%	1.0%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	759	100.0%	72.3%	145	19.1%	77.1%	193	25.4%	73.6%	421	55.4%	70.2%
> 30 miles	283	100.0%	26.9%	42	14.8%	22.3%	69	24.3%	26.3%	172	60.7%	28.7%
Zip Invalid/Missing	7	100.0%	0.6%	1	14.2%	0.5%	0	0	0	6	85.7%	1.0%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	479	100.0%	45.6%	115	24.0%	61.1%	116	24.2%	44.2%	248	51.7%	41.4%
> 30 miles	563	100.0%	53.6%	72	12.7%	38.2%	146	25.9%	55.7%	345	61.2%	57.5%
Zip Invalid/Missing	7	100.0%	0.6%	1	14.2%	0.5%	0	0	0	6	85.7%	1.0%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	18	100.0%	1.7%	4	22.2%	2.1%	2	11.1%	0.7%	12	66.6%	2.0%
50-64 years	112	100.0%	10.6%	41	36.6%	21.8%	14	12.5%	5.3%	57	50.8%	9.5%
≥ 65 years	919	100.0%	87.6%	143	15.5%	76.0%	246	26.7%	93.8%	530	57.6%	88.4%
GENDER ¹⁶												
Female	38	100.0%	3.6%	7	18.4%	3.7%	8	21.0%	3.0%	23	60.5%	3.8%
Male	1,011	100.0%	96.3%	181	17.9%	96.2%	254	25.1%	96.9%	576	56.9%	96.1%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	797	100.0%	75.9%	176	22.0%	93.6%	109	13.6%	41.6%	512	64.2%	85.4%
Low Priority	129	100.0%	12.2%	7	5.4%	3.7%	58	44.9%	22.1%	64	49.6%	10.6%
Priority Level Missing	123	100.0%	11.7%	5	4.0%	2.6%	95	77.2%	36.2%	23	18.6%	3.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 21 - Sierra Pacific Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,136	100.0%	100.0%	168	14.7%	100.0%	297	26.1%	100.0%	671	59.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	425	100.0%	37.4%	47	11.0%	27.9%	106	24.9%	35.6%	272	64.0%	40.5%
Urban	697	100.0%	61.3%	115	16.4%	68.4%	189	27.1%	63.6%	393	56.3%	58.5%
Zip Invalid/Missing	14	100.0%	1.2%	6	42.8%	3.5%	2	14.2%	0.6%	6	42.8%	0.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,014	100.0%	89.2%	144	14.2%	85.7%	266	26.2%	89.5%	604	59.5%	90.0%
> 30 miles	108	100.0%	9.5%	18	16.6%	10.7%	29	26.8%	9.7%	61	56.4%	9.0%
Zip Invalid/Missing	14	100.0%	1.2%	6	42.8%	3.5%	2	14.2%	0.6%	6	42.8%	0.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	570	100.0%	50.1%	120	21.0%	71.4%	156	27.3%	52.5%	294	51.5%	43.8%
> 30 miles	552	100.0%	48.5%	42	7.6%	25.0%	139	25.1%	46.8%	371	67.2%	55.2%
Zip Invalid/Missing	14	100.0%	1.2%	6	42.8%	3.5%	2	14.2%	0.6%	6	42.8%	0.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	25	100.0%	2.2%	5	20.0%	2.9%	3	12.0%	1.0%	17	68.0%	2.5%
50-64 years	111	100.0%	9.7%	34	30.6%	20.2%	19	17.1%	6.3%	58	52.2%	8.6%
≥ 65 years	1,000	100.0%	88.0%	129	12.9%	76.7%	275	27.5%	92.5%	596	59.6%	88.8%
GENDER ¹⁶												
Female	56	100.0%	4.9%	4	7.1%	2.3%	24	42.8%	8.0%	28	50.0%	4.1%
Male	1,080	100.0%	95.0%	164	15.1%	97.6%	273	25.2%	91.9%	643	59.5%	95.8%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	794	100.0%	69.8%	158	19.8%	94.0%	96	12.0%	32.3%	540	68.0%	80.4%
Low Priority	176	100.0%	15.4%	8	4.5%	4.7%	65	36.9%	21.8%	103	58.5%	15.3%
Priority Level Missing	166	100.0%	14.6%	2	1.2%	1.1%	136	81.9%	45.7%	28	16.8%	4.1%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: 22 - Desert Pacific Healthcare Network

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	976	100.0%	100.0%	134	13.7%	100.0%	325	33.2%	100.0%	517	52.9%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	178	100.0%	18.2%	18	10.1%	13.4%	63	35.3%	19.3%	97	54.4%	18.7%
Urban	788	100.0%	80.7%	112	14.2%	83.5%	262	33.2%	80.6%	414	52.5%	80.0%
Zip Invalid/Missing	10	100.0%	1.0%	4	40.0%	2.9%	0	0	0	6	60.0%	1.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	922	100.0%	94.4%	127	13.7%	94.7%	312	33.8%	96.0%	483	52.3%	93.4%
> 30 miles	44	100.0%	4.5%	3	6.8%	2.2%	13	29.5%	4.0%	28	63.6%	5.4%
Zip Invalid/Missing	10	100.0%	1.0%	4	40.0%	2.9%	0	0	0	6	60.0%	1.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	762	100.0%	78.0%	114	14.9%	85.0%	245	32.1%	75.3%	403	52.8%	77.9%
> 30 miles	204	100.0%	20.9%	16	7.8%	11.9%	80	39.2%	24.6%	108	52.9%	20.8%
Zip Invalid/Missing	10	100.0%	1.0%	4	40.0%	2.9%	0	0	0	6	60.0%	1.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	29	100.0%	2.9%	10	34.4%	7.4%	3	10.3%	0.9%	16	55.1%	3.0%
50-64 years	112	100.0%	11.4%	30	26.7%	22.3%	22	19.6%	6.7%	60	53.5%	11.6%
≥ 65 years	835	100.0%	85.5%	94	11.2%	70.1%	300	35.9%	92.3%	441	52.8%	85.2%
GENDER ¹⁶												
Female	43	100.0%	4.4%	5	11.6%	3.7%	16	37.2%	4.9%	22	51.1%	4.2%
Male	933	100.0%	95.5%	129	13.8%	96.2%	309	33.1%	95.0%	495	53.0%	95.7%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	659	100.0%	67.5%	122	18.5%	91.0%	124	18.8%	38.1%	413	62.6%	79.8%
Low Priority	174	100.0%	17.8%	10	5.7%	7.4%	72	41.3%	22.1%	92	52.8%	17.7%
Priority Level Missing	143	100.0%	14.6%	2	1.3%	1.4%	129	90.2%	39.6%	12	8.3%	2.3%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 6 - Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer

VHA VISN ¹²: No VISN data available

Lung Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁵			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	160	100.0%	100.0%	2	1.2%	100.0%	147	91.8%	100.0%	11	6.8%	100.0%
TYPE OF ZIP CODE ¹³												
Zip Invalid/Missing	160	100.0%	100.0%	2	1.2%	100.0%	147	91.8%	100.0%	11	6.8%	100.0%
OUTPATIENT DISTANCE ¹⁴												
Zip Invalid/Missing	160	100.0%	100.0%	2	1.2%	100.0%	147	91.8%	100.0%	11	6.8%	100.0%
INPATIENT DISTANCE ¹⁴												
Zip Invalid/Missing	160	100.0%	100.0%	2	1.2%	100.0%	147	91.8%	100.0%	11	6.8%	100.0%
AGE AS OF 01/01/1999 ¹⁵												
50-64 years	2	100.0%	1.2%	0	0	0	2	100.0%	1.3%	0	0	0
≥ 65 years	158	100.0%	98.7%	2	1.2%	100.0%	145	91.7%	98.6%	11	6.9%	100.0%
GENDER ¹⁶												
Female	2	100.0%	1.2%	0	0	0	2	100.0%	1.3%	0	0	0
Male	158	100.0%	98.7%	2	1.2%	100.0%	145	91.7%	98.6%	11	6.9%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	9	100.0%	5.6%	0	0	0	8	88.8%	5.4%	1	11.1%	9.0%
Priority Level Missing	151	100.0%	94.3%	2	1.3%	100.0%	139	92.0%	94.5%	10	6.6%	90.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 6 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Lung Cancer
Variable Definitions and Descriptions

5. Medicare Enrolled Veterans (FFS only) in Lung Cancer Cohort: Included veterans who met at least one of the following criteria from fiscal year 1997 through 2000: used VHA services, enrolled in the VHA health system, or received compensation or pension benefits from the VA. The file draws from several data sources:

- Office of Policy and Planning (OPP) Enrollment File as of December 1999,
- VISN Support Service Center (VSSC) Unique User File for October 1997-September 2000,
- Veterans Benefits Administration (VBA) Compensation and Pension Non-Users File, and
- The Allocation Resource Center (ARC) Pharmacy Only Users File from October 1997-September 1999.

Demographic information for each veteran, used for comparing to the Medicare demographic data during the match process, was also obtained from these sources.

This column included the veterans in the CMS Denominator file (eligible for Medicare benefits during CY 1999) whose SSN matched an SSN in the above sampling frame, and who also matched on gender and at least 2 of the 3 parts of the date of birth (month/year, day/year, month/day), and who were alive as of January 1, 1999. These veterans were also not enrolled in a Medicare + Choice plan at any time during 1999 and had a diagnosis of lung cancer (ICD-9-CM=162, 162.3 - 162.9) during 1999 in one of the following datasets: VA Inpatient Main, VA Outpatient Diagnosis, VA Fee Basis Inpatient, VA Fee Basis Outpatient; CMS Part A MedPAR, CMS Part A Outpatient, or CMS Part B Carrier.

8. Used only VA services: Had at least one occurrence in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient; and no occurrences in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier.

9. Used only Medicare services: Had at least one occurrence in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier; and no occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

10. Used both services: Had at least one occurrence in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier; and at least one occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

11. Used neither service: Had no occurrence in any of these CMS claims files: Part A MedPAR, Outpatient, Part B Carrier; and no occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

12. VISN: Veteran’s Integrated Service Network is based on the zip code of the veteran’s residence. See Appendix E, Section I for details.

13. Type of zip code: Urban/Rural designation. See Appendix E, Section I for details.

14. Outpatient and inpatient distance: Distance between veteran’s residence zip code and the nearest inpatient and outpatient VA facility. See Appendix E, Section I for details.

15. Age: Veteran’s age as of 01/01/1999. See Appendix E, Section II for details.

16. Gender: Sex of the veteran. See Appendix E, Section III for details.

17. Constructed Priority Level: This variable was constructed by VIREC based on three different variables: “Priority Level”, “Means Test”, and “Service Connected Status”. High Priority includes veterans with “Priority Level” 1-6, “Means Test” Category A, or “Service Connected Status” 10-100%. Low Priority includes veterans with “Priority Level” 7 or “Means Test” Category C. See Appendix E, Section IV for details.

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

NATIONAL SUMMARY

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	35,371	100.0%	100.0%	3,046	8.6%	100.0%	12,801	36.1%	100.0%	19,524	55.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	16,239	100.0%	45.9%	1,286	7.9%	42.2%	5,472	33.6%	42.7%	9,481	58.3%	48.5%
Urban	18,554	100.0%	52.4%	1,665	8.9%	54.6%	7,156	38.5%	55.9%	9,733	52.4%	49.8%
Zip Invalid/Missing	578	100.0%	1.6%	95	16.4%	3.1%	173	29.9%	1.3%	310	53.6%	1.5%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	29,589	100.0%	83.6%	2,565	8.6%	84.2%	10,835	36.6%	84.6%	16,189	54.7%	82.9%
> 30 miles	5,204	100.0%	14.7%	386	7.4%	12.6%	1,793	34.4%	14.0%	3,025	58.1%	15.4%
Zip Invalid/Missing	578	100.0%	1.6%	95	16.4%	3.1%	173	29.9%	1.3%	310	53.6%	1.5%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	18,612	100.0%	52.6%	1,928	10.3%	63.2%	6,971	37.4%	54.4%	9,713	52.1%	49.7%
> 30 miles	16,181	100.0%	45.7%	1,023	6.3%	33.5%	5,657	34.9%	44.1%	9,501	58.7%	48.6%
Zip Invalid/Missing	578	100.0%	1.6%	95	16.4%	3.1%	173	29.9%	1.3%	310	53.6%	1.5%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	523	100.0%	1.4%	152	29.0%	4.9%	41	7.8%	0.3%	330	63.0%	1.6%
50-64 years	1,936	100.0%	5.4%	470	24.2%	15.4%	329	16.9%	2.5%	1,137	58.7%	5.8%
≥ 65 years	32,908	100.0%	93.0%	2,424	7.3%	79.5%	12,429	37.7%	97.0%	18,055	54.8%	92.4%
Invalid/Missing Age	4	100.0%	0.0%	0	0	0	2	50.0%	0.0%	2	50.0%	0.0%
GENDER ¹⁶												
Female	1,073	100.0%	3.0%	100	9.3%	3.2%	434	40.4%	3.3%	539	50.2%	2.7%
Male	34,298	100.0%	96.9%	2,946	8.5%	96.7%	12,367	36.0%	96.6%	18,985	55.3%	97.2%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	21,741	100.0%	61.4%	2,712	12.4%	89.0%	4,325	19.8%	33.7%	14,704	67.6%	75.3%
Low Priority	7,588	100.0%	21.4%	259	3.4%	8.5%	3,057	40.2%	23.8%	4,272	56.2%	21.8%
Priority Level Missing	6,042	100.0%	17.0%	75	1.2%	2.4%	5,419	89.6%	42.3%	548	9.0%	2.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 1 - VA New England Healthcare System

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,146	100.0%	100.0%	136	6.3%	100.0%	897	41.7%	100.0%	1,113	51.8%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	763	100.0%	35.5%	41	5.3%	30.1%	310	40.6%	34.5%	412	53.9%	37.0%
Urban	1,355	100.0%	63.1%	93	6.8%	68.3%	582	42.9%	64.8%	680	50.1%	61.0%
Zip Invalid/Missing	28	100.0%	1.3%	2	7.1%	1.4%	5	17.8%	0.5%	21	75.0%	1.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,039	100.0%	95.0%	131	6.4%	96.3%	863	42.3%	96.2%	1,045	51.2%	93.8%
> 30 miles	79	100.0%	3.6%	3	3.7%	2.2%	29	36.7%	3.2%	47	59.4%	4.2%
Zip Invalid/Missing	28	100.0%	1.3%	2	7.1%	1.4%	5	17.8%	0.5%	21	75.0%	1.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,471	100.0%	68.5%	117	7.9%	86.0%	613	41.6%	68.3%	741	50.3%	66.5%
> 30 miles	647	100.0%	30.1%	17	2.6%	12.5%	279	43.1%	31.1%	351	54.2%	31.5%
Zip Invalid/Missing	28	100.0%	1.3%	2	7.1%	1.4%	5	17.8%	0.5%	21	75.0%	1.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	27	100.0%	1.2%	6	22.2%	4.4%	3	11.1%	0.3%	18	66.6%	1.6%
50-64 years	98	100.0%	4.5%	26	26.5%	19.1%	19	19.3%	2.1%	53	54.0%	4.7%
≥ 65 years	2,021	100.0%	94.1%	104	5.1%	76.4%	875	43.2%	97.5%	1,042	51.5%	93.6%
GENDER ¹⁶												
Female	68	100.0%	3.1%	8	11.7%	5.8%	28	41.1%	3.1%	32	47.0%	2.8%
Male	2,078	100.0%	96.8%	128	6.1%	94.1%	869	41.8%	96.8%	1,081	52.0%	97.1%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,275	100.0%	59.4%	124	9.7%	91.1%	268	21.0%	29.8%	883	69.2%	79.3%
Low Priority	384	100.0%	17.8%	6	1.5%	4.4%	172	44.7%	19.1%	206	53.6%	18.5%
Priority Level Missing	487	100.0%	22.6%	6	1.2%	4.4%	457	93.8%	50.9%	24	4.9%	2.1%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 2 - VA Healthcare Network Upstate New York

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,409	100.0%	100.0%	94	6.6%	100.0%	515	36.5%	100.0%	800	56.7%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	776	100.0%	55.0%	44	5.6%	46.8%	294	37.8%	57.0%	438	56.4%	54.7%
Urban	613	100.0%	43.5%	48	7.8%	51.0%	219	35.7%	42.5%	346	56.4%	43.2%
Zip Invalid/Missing	20	100.0%	1.4%	2	10.0%	2.1%	2	10.0%	0.3%	16	80.0%	2.0%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,355	100.0%	96.1%	90	6.6%	95.7%	495	36.5%	96.1%	770	56.8%	96.2%
> 30 miles	34	100.0%	2.4%	2	5.8%	2.1%	18	52.9%	3.4%	14	41.1%	1.7%
Zip Invalid/Missing	20	100.0%	1.4%	2	10.0%	2.1%	2	10.0%	0.3%	16	80.0%	2.0%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	816	100.0%	57.9%	66	8.0%	70.2%	310	37.9%	60.1%	440	53.9%	55.0%
> 30 miles	573	100.0%	40.6%	26	4.5%	27.6%	203	35.4%	39.4%	344	60.0%	43.0%
Zip Invalid/Missing	20	100.0%	1.4%	2	10.0%	2.1%	2	10.0%	0.3%	16	80.0%	2.0%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	19	100.0%	1.3%	7	36.8%	7.4%	4	21.0%	0.7%	8	42.1%	1.0%
50-64 years	65	100.0%	4.6%	9	13.8%	9.5%	6	9.2%	1.1%	50	76.9%	6.2%
≥ 65 years	1,325	100.0%	94.0%	78	5.8%	82.9%	505	38.1%	98.0%	742	56.0%	92.7%
GENDER ¹⁶												
Female	40	100.0%	2.8%	1	2.5%	1.0%	18	45.0%	3.4%	21	52.5%	2.6%
Male	1,369	100.0%	97.1%	93	6.7%	98.9%	497	36.3%	96.5%	779	56.9%	97.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	819	100.0%	58.1%	78	9.5%	82.9%	183	22.3%	35.5%	558	68.1%	69.7%
Low Priority	387	100.0%	27.4%	16	4.1%	17.0%	160	41.3%	31.0%	211	54.5%	26.3%
Priority Level Missing	203	100.0%	14.4%	0	0	0	172	84.7%	33.3%	31	15.2%	3.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 3 - VA NY/NJ Veterans Healthcare Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	3,000	100.0%	100.0%	163	5.4%	100.0%	1,346	44.8%	100.0%	1,491	49.7%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	255	100.0%	8.5%	14	5.4%	8.5%	115	45.0%	8.5%	126	49.4%	8.4%
Urban	2,738	100.0%	91.2%	149	5.4%	91.4%	1,228	44.8%	91.2%	1,361	49.7%	91.2%
Zip Invalid/Missing	7	100.0%	0.2%	0	0	0	3	42.8%	0.2%	4	57.1%	0.2%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,993	100.0%	99.7%	163	5.4%	100.0%	1,343	44.8%	99.7%	1,487	49.6%	99.7%
Zip Invalid/Missing	7	100.0%	0.2%	0	0	0	3	42.8%	0.2%	4	57.1%	0.2%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,743	100.0%	91.4%	152	5.5%	93.2%	1,238	45.1%	91.9%	1,353	49.3%	90.7%
> 30 miles	250	100.0%	8.3%	11	4.4%	6.7%	105	42.0%	7.8%	134	53.6%	8.9%
Zip Invalid/Missing	7	100.0%	0.2%	0	0	0	3	42.8%	0.2%	4	57.1%	0.2%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	25	100.0%	0.8%	11	44.0%	6.7%	2	8.0%	0.1%	12	48.0%	0.8%
50-64 years	100	100.0%	3.3%	24	24.0%	14.7%	23	23.0%	1.7%	53	53.0%	3.5%
≥ 65 years	2,875	100.0%	95.8%	128	4.4%	78.5%	1,321	45.9%	98.1%	1,426	49.6%	95.6%
GENDER ¹⁶												
Female	63	100.0%	2.1%	7	11.1%	4.2%	31	49.2%	2.3%	25	39.6%	1.6%
Male	2,937	100.0%	97.9%	156	5.3%	95.7%	1,315	44.7%	97.6%	1,466	49.9%	98.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,491	100.0%	49.7%	126	8.4%	77.3%	465	31.1%	34.5%	900	60.3%	60.3%
Low Priority	1,049	100.0%	34.9%	34	3.2%	20.8%	456	43.4%	33.8%	559	53.2%	37.4%
Priority Level Missing	460	100.0%	15.3%	3	0.6%	1.8%	425	92.3%	31.5%	32	6.9%	2.1%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 4 - VA Stars & Stripes Healthcare Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,843	100.0%	100.0%	145	5.1%	100.0%	1,067	37.5%	100.0%	1,631	57.3%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,379	100.0%	48.5%	61	4.4%	42.0%	499	36.1%	46.7%	819	59.3%	50.2%
Urban	1,451	100.0%	51.0%	83	5.7%	57.2%	568	39.1%	53.2%	800	55.1%	49.0%
Zip Invalid/Missing	13	100.0%	0.4%	1	7.6%	0.6%	0	0	0	12	92.3%	0.7%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,773	100.0%	97.5%	142	5.1%	97.9%	1,035	37.3%	97.0%	1,596	57.5%	97.8%
> 30 miles	57	100.0%	2.0%	2	3.5%	1.3%	32	56.1%	2.9%	23	40.3%	1.4%
Zip Invalid/Missing	13	100.0%	0.4%	1	7.6%	0.6%	0	0	0	12	92.3%	0.7%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,854	100.0%	65.2%	108	5.8%	74.4%	706	38.0%	66.1%	1,040	56.0%	63.7%
> 30 miles	976	100.0%	34.3%	36	3.6%	24.8%	361	36.9%	33.8%	579	59.3%	35.4%
Zip Invalid/Missing	13	100.0%	0.4%	1	7.6%	0.6%	0	0	0	12	92.3%	0.7%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	22	100.0%	0.7%	6	27.2%	4.1%	3	13.6%	0.2%	13	59.0%	0.7%
50-64 years	110	100.0%	3.8%	19	17.2%	13.1%	16	14.5%	1.4%	75	68.1%	4.5%
≥ 65 years	2,710	100.0%	95.3%	120	4.4%	82.7%	1,047	38.6%	98.1%	1,543	56.9%	94.6%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	1	100.0%	0.0%	0	0	0
GENDER ¹⁶												
Female	46	100.0%	1.6%	0	0	0	18	39.1%	1.6%	28	60.8%	1.7%
Male	2,797	100.0%	98.3%	145	5.1%	100.0%	1,049	37.5%	98.3%	1,603	57.3%	98.2%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,697	100.0%	59.6%	124	7.3%	85.5%	391	23.0%	36.6%	1,182	69.6%	72.4%
Low Priority	724	100.0%	25.4%	19	2.6%	13.1%	276	38.1%	25.8%	429	59.2%	26.3%
Priority Level Missing	422	100.0%	14.8%	2	0.4%	1.3%	400	94.7%	37.4%	20	4.7%	1.2%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 5 - VA Capital Health Care Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	862	100.0%	100.0%	105	12.1%	100.0%	318	36.8%	100.0%	439	50.9%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	282	100.0%	32.7%	24	8.5%	22.8%	102	36.1%	32.0%	156	55.3%	35.5%
Urban	555	100.0%	64.3%	69	12.4%	65.7%	216	38.9%	67.9%	270	48.6%	61.5%
Zip Invalid/Missing	25	100.0%	2.9%	12	48.0%	11.4%	0	0	0	13	52.0%	2.9%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	826	100.0%	95.8%	93	11.2%	88.5%	315	38.1%	99.0%	418	50.6%	95.2%
> 30 miles	11	100.0%	1.2%	0	0	0	3	27.2%	0.9%	8	72.7%	1.8%
Zip Invalid/Missing	25	100.0%	2.9%	12	48.0%	11.4%	0	0	0	13	52.0%	2.9%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	677	100.0%	78.5%	84	12.4%	80.0%	258	38.1%	81.1%	335	49.4%	76.3%
> 30 miles	160	100.0%	18.5%	9	5.6%	8.5%	60	37.5%	18.8%	91	56.8%	20.7%
Zip Invalid/Missing	25	100.0%	2.9%	12	48.0%	11.4%	0	0	0	13	52.0%	2.9%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	10	100.0%	1.1%	3	30.0%	2.8%	1	10.0%	0.3%	6	60.0%	1.3%
50-64 years	44	100.0%	5.1%	16	36.3%	15.2%	6	13.6%	1.8%	22	50.0%	5.0%
≥ 65 years	808	100.0%	93.7%	86	10.6%	81.9%	311	38.4%	97.7%	411	50.8%	93.6%
GENDER ¹⁶												
Female	19	100.0%	2.2%	1	5.2%	0.9%	13	68.4%	4.0%	5	26.3%	1.1%
Male	843	100.0%	97.7%	104	12.3%	99.0%	305	36.1%	95.9%	434	51.4%	98.8%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	543	100.0%	62.9%	94	17.3%	89.5%	100	18.4%	31.4%	349	64.2%	79.4%
Low Priority	145	100.0%	16.8%	9	6.2%	8.5%	53	36.5%	16.6%	83	57.2%	18.9%
Priority Level Missing	174	100.0%	20.1%	2	1.1%	1.9%	165	94.8%	51.8%	7	4.0%	1.5%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 6 - The Mid-Atlantic Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,600	100.0%	100.0%	129	8.0%	100.0%	621	38.8%	100.0%	850	53.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	947	100.0%	59.1%	70	7.3%	54.2%	371	39.1%	59.7%	506	53.4%	59.5%
Urban	627	100.0%	39.1%	56	8.9%	43.4%	250	39.8%	40.2%	321	51.1%	37.7%
Zip Invalid/Missing	26	100.0%	1.6%	3	11.5%	2.3%	0	0	0	23	88.4%	2.7%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,178	100.0%	73.6%	105	8.9%	81.3%	458	38.8%	73.7%	615	52.2%	72.3%
> 30 miles	396	100.0%	24.7%	21	5.3%	16.2%	163	41.1%	26.2%	212	53.5%	24.9%
Zip Invalid/Missing	26	100.0%	1.6%	3	11.5%	2.3%	0	0	0	23	88.4%	2.7%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	770	100.0%	48.1%	81	10.5%	62.7%	292	37.9%	47.0%	397	51.5%	46.7%
> 30 miles	804	100.0%	50.2%	45	5.5%	34.8%	329	40.9%	52.9%	430	53.4%	50.5%
Zip Invalid/Missing	26	100.0%	1.6%	3	11.5%	2.3%	0	0	0	23	88.4%	2.7%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	26	100.0%	1.6%	5	19.2%	3.8%	0	0	0	21	80.7%	2.4%
50-64 years	103	100.0%	6.4%	21	20.3%	16.2%	26	25.2%	4.1%	56	54.3%	6.5%
≥ 65 years	1,471	100.0%	91.9%	103	7.0%	79.8%	595	40.4%	95.8%	773	52.5%	90.9%
GENDER ¹⁶												
Female	57	100.0%	3.5%	2	3.5%	1.5%	29	50.8%	4.6%	26	45.6%	3.0%
Male	1,543	100.0%	96.4%	127	8.2%	98.4%	592	38.3%	95.3%	824	53.4%	96.9%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,021	100.0%	63.8%	114	11.1%	88.3%	208	20.3%	33.4%	699	68.4%	82.2%
Low Priority	293	100.0%	18.3%	13	4.4%	10.0%	157	53.5%	25.2%	123	41.9%	14.4%
Priority Level Missing	286	100.0%	17.8%	2	0.6%	1.5%	256	89.5%	41.2%	28	9.7%	3.2%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 7 - The Atlanta Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,780	100.0%	100.0%	152	8.5%	100.0%	587	32.9%	100.0%	1,041	58.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,007	100.0%	56.5%	81	8.0%	53.2%	341	33.8%	58.0%	585	58.0%	56.1%
Urban	742	100.0%	41.6%	65	8.7%	42.7%	241	32.4%	41.0%	436	58.7%	41.8%
Zip Invalid/Missing	31	100.0%	1.7%	6	19.3%	3.9%	5	16.1%	0.8%	20	64.5%	1.9%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,243	100.0%	69.8%	110	8.8%	72.3%	411	33.0%	70.0%	722	58.0%	69.3%
> 30 miles	506	100.0%	28.4%	36	7.1%	23.6%	171	33.7%	29.1%	299	59.0%	28.7%
Zip Invalid/Missing	31	100.0%	1.7%	6	19.3%	3.9%	5	16.1%	0.8%	20	64.5%	1.9%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	602	100.0%	33.8%	72	11.9%	47.3%	189	31.3%	32.1%	341	56.6%	32.7%
> 30 miles	1,147	100.0%	64.4%	74	6.4%	48.6%	393	34.2%	66.9%	680	59.2%	65.3%
Zip Invalid/Missing	31	100.0%	1.7%	6	19.3%	3.9%	5	16.1%	0.8%	20	64.5%	1.9%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	36	100.0%	2.0%	11	30.5%	7.2%	1	2.7%	0.1%	24	66.6%	2.3%
50-64 years	111	100.0%	6.2%	25	22.5%	16.4%	21	18.9%	3.5%	65	58.5%	6.2%
≥ 65 years	1,633	100.0%	91.7%	116	7.1%	76.3%	565	34.5%	96.2%	952	58.2%	91.4%
GENDER ¹⁶												
Female	54	100.0%	3.0%	5	9.2%	3.2%	20	37.0%	3.4%	29	53.7%	2.7%
Male	1,726	100.0%	96.9%	147	8.5%	96.7%	567	32.8%	96.5%	1,012	58.6%	97.2%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,128	100.0%	63.3%	139	12.3%	91.4%	159	14.0%	27.0%	830	73.5%	79.7%
Low Priority	311	100.0%	17.4%	10	3.2%	6.5%	118	37.9%	20.1%	183	58.8%	17.5%
Priority Level Missing	341	100.0%	19.1%	3	0.8%	1.9%	310	90.9%	52.8%	28	8.2%	2.6%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 8 - VA Sunshine Healthcare Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	3,071	100.0%	100.0%	260	8.4%	100.0%	1,139	37.0%	100.0%	1,672	54.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,325	100.0%	43.1%	154	11.6%	59.2%	401	30.2%	35.2%	770	58.1%	46.0%
Urban	1,689	100.0%	54.9%	97	5.7%	37.3%	727	43.0%	63.8%	865	51.2%	51.7%
Zip Invalid/Missing	57	100.0%	1.8%	9	15.7%	3.4%	11	19.2%	0.9%	37	64.9%	2.2%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	2,827	100.0%	92.0%	237	8.3%	91.1%	1,058	37.4%	92.8%	1,532	54.1%	91.6%
> 30 miles	187	100.0%	6.0%	14	7.4%	5.3%	70	37.4%	6.1%	103	55.0%	6.1%
Zip Invalid/Missing	57	100.0%	1.8%	9	15.7%	3.4%	11	19.2%	0.9%	37	64.9%	2.2%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,530	100.0%	49.8%	157	10.2%	60.3%	557	36.4%	48.9%	816	53.3%	48.8%
> 30 miles	1,484	100.0%	48.3%	94	6.3%	36.1%	571	38.4%	50.1%	819	55.1%	48.9%
Zip Invalid/Missing	57	100.0%	1.8%	9	15.7%	3.4%	11	19.2%	0.9%	37	64.9%	2.2%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	42	100.0%	1.3%	14	33.3%	5.3%	2	4.7%	0.1%	26	61.9%	1.5%
50-64 years	148	100.0%	4.8%	39	26.3%	15.0%	20	13.5%	1.7%	89	60.1%	5.3%
≥ 65 years	2,881	100.0%	93.8%	207	7.1%	79.6%	1,117	38.7%	98.0%	1,557	54.0%	93.1%
GENDER ¹⁶												
Female	101	100.0%	3.2%	11	10.8%	4.2%	52	51.4%	4.5%	38	37.6%	2.2%
Male	2,970	100.0%	96.7%	249	8.3%	95.7%	1,087	36.5%	95.4%	1,634	55.0%	97.7%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,953	100.0%	63.5%	244	12.4%	93.8%	382	19.5%	33.5%	1,327	67.9%	79.3%
Low Priority	598	100.0%	19.4%	9	1.5%	3.4%	272	45.4%	23.8%	317	53.0%	18.9%
Priority Level Missing	520	100.0%	16.9%	7	1.3%	2.6%	485	93.2%	42.5%	28	5.3%	1.6%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 9 - VA Mid South Healthcare Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,562	100.0%	100.0%	134	8.5%	100.0%	500	32.0%	100.0%	928	59.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,048	100.0%	67.0%	78	7.4%	58.2%	347	33.1%	69.4%	623	59.4%	67.1%
Urban	489	100.0%	31.3%	52	10.6%	38.8%	151	30.8%	30.2%	286	58.4%	30.8%
Zip Invalid/Missing	25	100.0%	1.6%	4	16.0%	2.9%	2	8.0%	0.4%	19	76.0%	2.0%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,051	100.0%	67.2%	100	9.5%	74.6%	337	32.0%	67.4%	614	58.4%	66.1%
> 30 miles	486	100.0%	31.1%	30	6.1%	22.3%	161	33.1%	32.2%	295	60.6%	31.7%
Zip Invalid/Missing	25	100.0%	1.6%	4	16.0%	2.9%	2	8.0%	0.4%	19	76.0%	2.0%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	608	100.0%	38.9%	67	11.0%	50.0%	185	30.4%	37.0%	356	58.5%	38.3%
> 30 miles	929	100.0%	59.4%	63	6.7%	47.0%	313	33.6%	62.6%	553	59.5%	59.5%
Zip Invalid/Missing	25	100.0%	1.6%	4	16.0%	2.9%	2	8.0%	0.4%	19	76.0%	2.0%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	37	100.0%	2.3%	9	24.3%	6.7%	2	5.4%	0.4%	26	70.2%	2.8%
50-64 years	125	100.0%	8.0%	25	20.0%	18.6%	21	16.8%	4.2%	79	63.2%	8.5%
≥ 65 years	1,400	100.0%	89.6%	100	7.1%	74.6%	477	34.0%	95.4%	823	58.7%	88.6%
GENDER ¹⁶												
Female	34	100.0%	2.1%	3	8.8%	2.2%	13	38.2%	2.6%	18	52.9%	1.9%
Male	1,528	100.0%	97.8%	131	8.5%	97.7%	487	31.8%	97.4%	910	59.5%	98.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,091	100.0%	69.8%	125	11.4%	93.2%	196	17.9%	39.2%	770	70.5%	82.9%
Low Priority	236	100.0%	15.1%	7	2.9%	5.2%	89	37.7%	17.8%	140	59.3%	15.0%
Priority Level Missing	235	100.0%	15.0%	2	0.8%	1.4%	215	91.4%	43.0%	18	7.6%	1.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 10 - VA Healthcare System of Ohio

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,307	100.0%	100.0%	75	5.7%	100.0%	524	40.0%	100.0%	708	54.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	557	100.0%	42.6%	29	5.2%	38.6%	207	37.1%	39.5%	321	57.6%	45.3%
Urban	732	100.0%	56.0%	43	5.8%	57.3%	313	42.7%	59.7%	376	51.3%	53.1%
Zip Invalid/Missing	18	100.0%	1.3%	3	16.6%	4.0%	4	22.2%	0.7%	11	61.1%	1.5%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,232	100.0%	94.2%	67	5.4%	89.3%	498	40.4%	95.0%	667	54.1%	94.2%
> 30 miles	57	100.0%	4.3%	5	8.7%	6.6%	22	38.5%	4.1%	30	52.6%	4.2%
Zip Invalid/Missing	18	100.0%	1.3%	3	16.6%	4.0%	4	22.2%	0.7%	11	61.1%	1.5%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	616	100.0%	47.1%	51	8.2%	68.0%	275	44.6%	52.4%	290	47.0%	40.9%
> 30 miles	673	100.0%	51.4%	21	3.1%	28.0%	245	36.4%	46.7%	407	60.4%	57.4%
Zip Invalid/Missing	18	100.0%	1.3%	3	16.6%	4.0%	4	22.2%	0.7%	11	61.1%	1.5%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	20	100.0%	1.5%	6	30.0%	8.0%	2	10.0%	0.3%	12	60.0%	1.6%
50-64 years	69	100.0%	5.2%	16	23.1%	21.3%	13	18.8%	2.4%	40	57.9%	5.6%
≥ 65 years	1,217	100.0%	93.1%	53	4.3%	70.6%	509	41.8%	97.1%	655	53.8%	92.5%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	0	0	0	1	100.0%	0.1%
GENDER ¹⁶												
Female	26	100.0%	1.9%	1	3.8%	1.3%	13	50.0%	2.4%	12	46.1%	1.6%
Male	1,281	100.0%	98.0%	74	5.7%	98.6%	511	39.8%	97.5%	696	54.3%	98.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	838	100.0%	64.1%	72	8.5%	96.0%	225	26.8%	42.9%	541	64.5%	76.4%
Low Priority	247	100.0%	18.8%	3	1.2%	4.0%	88	35.6%	16.7%	156	63.1%	22.0%
Priority Level Missing	222	100.0%	16.9%	0	0	0	211	95.0%	40.2%	11	4.9%	1.5%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 11 - Veterans In Partnership

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,792	100.0%	100.0%	138	7.7%	100.0%	632	35.2%	100.0%	1,022	57.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	818	100.0%	45.6%	58	7.0%	42.0%	275	33.6%	43.5%	485	59.2%	47.4%
Urban	964	100.0%	53.7%	79	8.1%	57.2%	356	36.9%	56.3%	529	54.8%	51.7%
Zip Invalid/Missing	10	100.0%	0.5%	1	10.0%	0.7%	1	10.0%	0.1%	8	80.0%	0.7%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,504	100.0%	83.9%	121	8.0%	87.6%	530	35.2%	83.8%	853	56.7%	83.4%
> 30 miles	278	100.0%	15.5%	16	5.7%	11.5%	101	36.3%	15.9%	161	57.9%	15.7%
Zip Invalid/Missing	10	100.0%	0.5%	1	10.0%	0.7%	1	10.0%	0.1%	8	80.0%	0.7%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	821	100.0%	45.8%	77	9.3%	55.7%	290	35.3%	45.8%	454	55.2%	44.4%
> 30 miles	961	100.0%	53.6%	60	6.2%	43.4%	341	35.4%	53.9%	560	58.2%	54.7%
Zip Invalid/Missing	10	100.0%	0.5%	1	10.0%	0.7%	1	10.0%	0.1%	8	80.0%	0.7%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	30	100.0%	1.6%	9	30.0%	6.5%	1	3.3%	0.1%	20	66.6%	1.9%
50-64 years	104	100.0%	5.8%	27	25.9%	19.5%	15	14.4%	2.3%	62	59.6%	6.0%
≥ 65 years	1,658	100.0%	92.5%	102	6.1%	73.9%	616	37.1%	97.4%	940	56.6%	91.9%
GENDER ¹⁶												
Female	42	100.0%	2.3%	2	4.7%	1.4%	15	35.7%	2.3%	25	59.5%	2.4%
Male	1,750	100.0%	97.6%	136	7.7%	98.5%	617	35.2%	97.6%	997	56.9%	97.5%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,067	100.0%	59.5%	122	11.4%	88.4%	198	18.5%	31.3%	747	70.0%	73.0%
Low Priority	375	100.0%	20.9%	14	3.7%	10.1%	115	30.6%	18.1%	246	65.6%	24.0%
Priority Level Missing	350	100.0%	19.5%	2	0.5%	1.4%	319	91.1%	50.4%	29	8.2%	2.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 12 - The Great Lakes Health Care System

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,705	100.0%	100.0%	180	10.5%	100.0%	641	37.5%	100.0%	884	51.8%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	540	100.0%	31.6%	42	7.7%	23.3%	190	35.1%	29.6%	308	57.0%	34.8%
Urban	1,153	100.0%	67.6%	137	11.8%	76.1%	445	38.5%	69.4%	571	49.5%	64.5%
Zip Invalid/Missing	12	100.0%	0.7%	1	8.3%	0.5%	6	50.0%	0.9%	5	41.6%	0.5%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,591	100.0%	93.3%	170	10.6%	94.4%	598	37.5%	93.2%	823	51.7%	93.0%
> 30 miles	102	100.0%	5.9%	9	8.8%	5.0%	37	36.2%	5.7%	56	54.9%	6.3%
Zip Invalid/Missing	12	100.0%	0.7%	1	8.3%	0.5%	6	50.0%	0.9%	5	41.6%	0.5%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,125	100.0%	65.9%	149	13.2%	82.7%	437	38.8%	68.1%	539	47.9%	60.9%
> 30 miles	568	100.0%	33.3%	30	5.2%	16.6%	198	34.8%	30.8%	340	59.8%	38.4%
Zip Invalid/Missing	12	100.0%	0.7%	1	8.3%	0.5%	6	50.0%	0.9%	5	41.6%	0.5%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	22	100.0%	1.2%	12	54.5%	6.6%	2	9.0%	0.3%	8	36.3%	0.9%
50-64 years	69	100.0%	4.0%	14	20.2%	7.7%	13	18.8%	2.0%	42	60.8%	4.7%
≥ 65 years	1,614	100.0%	94.6%	154	9.5%	85.5%	626	38.7%	97.6%	834	51.6%	94.3%
GENDER ¹⁶												
Female	62	100.0%	3.6%	5	8.0%	2.7%	32	51.6%	4.9%	25	40.3%	2.8%
Male	1,643	100.0%	96.3%	175	10.6%	97.2%	609	37.0%	95.0%	859	52.2%	97.1%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,048	100.0%	61.4%	158	15.0%	87.7%	254	24.2%	39.6%	636	60.6%	71.9%
Low Priority	406	100.0%	23.8%	19	4.6%	10.5%	173	42.6%	26.9%	214	52.7%	24.2%
Priority Level Missing	251	100.0%	14.7%	3	1.1%	1.6%	214	85.2%	33.3%	34	13.5%	3.8%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 13 - VA Upper Midwest Health Care Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,011	100.0%	100.0%	94	9.2%	100.0%	310	30.6%	100.0%	607	60.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	667	100.0%	65.9%	52	7.7%	55.3%	213	31.9%	68.7%	402	60.2%	66.2%
Urban	321	100.0%	31.7%	36	11.2%	38.2%	96	29.9%	30.9%	189	58.8%	31.1%
Zip Invalid/Missing	23	100.0%	2.2%	6	26.0%	6.3%	1	4.3%	0.3%	16	69.5%	2.6%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	590	100.0%	58.3%	61	10.3%	64.8%	176	29.8%	56.7%	353	59.8%	58.1%
> 30 miles	398	100.0%	39.3%	27	6.7%	28.7%	133	33.4%	42.9%	238	59.7%	39.2%
Zip Invalid/Missing	23	100.0%	2.2%	6	26.0%	6.3%	1	4.3%	0.3%	16	69.5%	2.6%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	346	100.0%	34.2%	51	14.7%	54.2%	102	29.4%	32.9%	193	55.7%	31.7%
> 30 miles	642	100.0%	63.5%	37	5.7%	39.3%	207	32.2%	66.7%	398	61.9%	65.5%
Zip Invalid/Missing	23	100.0%	2.2%	6	26.0%	6.3%	1	4.3%	0.3%	16	69.5%	2.6%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	10	100.0%	0.9%	5	50.0%	5.3%	0	0	0	5	50.0%	0.8%
50-64 years	50	100.0%	4.9%	8	16.0%	8.5%	10	20.0%	3.2%	32	64.0%	5.2%
≥ 65 years	951	100.0%	94.0%	81	8.5%	86.1%	300	31.5%	96.7%	570	59.9%	93.9%
GENDER ¹⁶												
Female	103	100.0%	10.1%	13	12.6%	13.8%	23	22.3%	7.4%	67	65.0%	11.0%
Male	908	100.0%	89.8%	81	8.9%	86.1%	287	31.6%	92.5%	540	59.4%	88.9%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	517	100.0%	51.1%	70	13.5%	74.4%	83	16.0%	26.7%	364	70.4%	59.9%
Low Priority	284	100.0%	28.0%	12	4.2%	12.7%	107	37.6%	34.5%	165	58.0%	27.1%
Priority Level Missing	210	100.0%	20.7%	12	5.7%	12.7%	120	57.1%	38.7%	78	37.1%	12.8%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 14 - Central Plains Health Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	896	100.0%	100.0%	45	5.0%	100.0%	285	31.8%	100.0%	566	63.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	671	100.0%	74.8%	34	5.0%	75.5%	197	29.3%	69.1%	440	65.5%	77.7%
Urban	218	100.0%	24.3%	10	4.5%	22.2%	87	39.9%	30.5%	121	55.5%	21.3%
Zip Invalid/Missing	7	100.0%	0.7%	1	14.2%	2.2%	1	14.2%	0.3%	5	71.4%	0.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	579	100.0%	64.6%	29	5.0%	64.4%	191	32.9%	67.0%	359	62.0%	63.4%
> 30 miles	310	100.0%	34.5%	15	4.8%	33.3%	93	30.0%	32.6%	202	65.1%	35.6%
Zip Invalid/Missing	7	100.0%	0.7%	1	14.2%	2.2%	1	14.2%	0.3%	5	71.4%	0.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	199	100.0%	22.2%	14	7.0%	31.1%	62	31.1%	21.7%	123	61.8%	21.7%
> 30 miles	690	100.0%	77.0%	30	4.3%	66.6%	222	32.1%	77.8%	438	63.4%	77.3%
Zip Invalid/Missing	7	100.0%	0.7%	1	14.2%	2.2%	1	14.2%	0.3%	5	71.4%	0.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	10	100.0%	1.1%	0	0	0	1	10.0%	0.3%	9	90.0%	1.5%
50-64 years	41	100.0%	4.5%	7	17.0%	15.5%	9	21.9%	3.1%	25	60.9%	4.4%
≥ 65 years	845	100.0%	94.3%	38	4.4%	84.4%	275	32.5%	96.4%	532	62.9%	93.9%
GENDER ¹⁶												
Female	20	100.0%	2.2%	4	20.0%	8.8%	8	40.0%	2.8%	8	40.0%	1.4%
Male	876	100.0%	97.7%	41	4.6%	91.1%	277	31.6%	97.1%	558	63.6%	98.5%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	438	100.0%	48.8%	33	7.5%	73.3%	73	16.6%	25.6%	332	75.7%	58.6%
Low Priority	356	100.0%	39.7%	10	2.8%	22.2%	125	35.1%	43.8%	221	62.0%	39.0%
Priority Level Missing	102	100.0%	11.3%	2	1.9%	4.4%	87	85.2%	30.5%	13	12.7%	2.2%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 15 - VA Heartland Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,472	100.0%	100.0%	148	10.0%	100.0%	437	29.6%	100.0%	887	60.2%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,005	100.0%	68.2%	84	8.3%	56.7%	296	29.4%	67.7%	625	62.1%	70.4%
Urban	453	100.0%	30.7%	60	13.2%	40.5%	141	31.1%	32.2%	252	55.6%	28.4%
Zip Invalid/Missing	14	100.0%	0.9%	4	28.5%	2.7%	0	0	0	10	71.4%	1.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,033	100.0%	70.1%	115	11.1%	77.7%	308	29.8%	70.4%	610	59.0%	68.7%
> 30 miles	425	100.0%	28.8%	29	6.8%	19.5%	129	30.3%	29.5%	267	62.8%	30.1%
Zip Invalid/Missing	14	100.0%	0.9%	4	28.5%	2.7%	0	0	0	10	71.4%	1.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	570	100.0%	38.7%	70	12.2%	47.2%	188	32.9%	43.0%	312	54.7%	35.1%
> 30 miles	888	100.0%	60.3%	74	8.3%	50.0%	249	28.0%	56.9%	565	63.6%	63.6%
Zip Invalid/Missing	14	100.0%	0.9%	4	28.5%	2.7%	0	0	0	10	71.4%	1.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	20	100.0%	1.3%	7	35.0%	4.7%	3	15.0%	0.6%	10	50.0%	1.1%
50-64 years	87	100.0%	5.9%	18	20.6%	12.1%	15	17.2%	3.4%	54	62.0%	6.0%
≥ 65 years	1,365	100.0%	92.7%	123	9.0%	83.1%	419	30.6%	95.8%	823	60.2%	92.7%
GENDER ¹⁶												
Female	18	100.0%	1.2%	1	5.5%	0.6%	7	38.8%	1.6%	10	55.5%	1.1%
Male	1,454	100.0%	98.7%	147	10.1%	99.3%	430	29.5%	98.3%	877	60.3%	98.8%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	955	100.0%	64.8%	136	14.2%	91.8%	139	14.5%	31.8%	680	71.2%	76.6%
Low Priority	321	100.0%	21.8%	11	3.4%	7.4%	111	34.5%	25.4%	199	61.9%	22.4%
Priority Level Missing	196	100.0%	13.3%	1	0.5%	0.6%	187	95.4%	42.7%	8	4.0%	0.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 16 - South Central VA Healthcare Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,573	100.0%	100.0%	303	11.7%	100.0%	804	31.2%	100.0%	1,466	56.9%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,520	100.0%	59.0%	142	9.3%	46.8%	468	30.7%	58.2%	910	59.8%	62.0%
Urban	1,013	100.0%	39.3%	149	14.7%	49.1%	334	32.9%	41.5%	530	52.3%	36.1%
Zip Invalid/Missing	40	100.0%	1.5%	12	30.0%	3.9%	2	5.0%	0.2%	26	65.0%	1.7%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,619	100.0%	62.9%	213	13.1%	70.2%	481	29.7%	59.8%	925	57.1%	63.0%
> 30 miles	914	100.0%	35.5%	78	8.5%	25.7%	321	35.1%	39.9%	515	56.3%	35.1%
Zip Invalid/Missing	40	100.0%	1.5%	12	30.0%	3.9%	2	5.0%	0.2%	26	65.0%	1.7%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	830	100.0%	32.2%	150	18.0%	49.5%	240	28.9%	29.8%	440	53.0%	30.0%
> 30 miles	1,703	100.0%	66.1%	141	8.2%	46.5%	562	33.0%	69.9%	1,000	58.7%	68.2%
Zip Invalid/Missing	40	100.0%	1.5%	12	30.0%	3.9%	2	5.0%	0.2%	26	65.0%	1.7%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	30	100.0%	1.1%	9	30.0%	2.9%	0	0	0	21	70.0%	1.4%
50-64 years	191	100.0%	7.4%	53	27.7%	17.4%	25	13.0%	3.1%	113	59.1%	7.7%
≥ 65 years	2,352	100.0%	91.4%	241	10.2%	79.5%	779	33.1%	96.8%	1,332	56.6%	90.8%
GENDER ¹⁶												
Female	51	100.0%	1.9%	2	3.9%	0.6%	23	45.0%	2.8%	26	50.9%	1.7%
Male	2,522	100.0%	98.0%	301	11.9%	99.3%	781	30.9%	97.1%	1,440	57.0%	98.2%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,865	100.0%	72.4%	288	15.4%	95.0%	314	16.8%	39.0%	1,263	67.7%	86.1%
Low Priority	305	100.0%	11.8%	11	3.6%	3.6%	114	37.3%	14.1%	180	59.0%	12.2%
Priority Level Missing	403	100.0%	15.6%	4	0.9%	1.3%	376	93.3%	46.7%	23	5.7%	1.5%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 17 - VA Heart of Texas Health Care Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,173	100.0%	100.0%	129	10.9%	100.0%	395	33.6%	100.0%	649	55.3%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	618	100.0%	52.6%	62	10.0%	48.0%	197	31.8%	49.8%	359	58.0%	55.3%
Urban	541	100.0%	46.1%	65	12.0%	50.3%	196	36.2%	49.6%	280	51.7%	43.1%
Zip Invalid/Missing	14	100.0%	1.1%	2	14.2%	1.5%	2	14.2%	0.5%	10	71.4%	1.5%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,035	100.0%	88.2%	114	11.0%	88.3%	358	34.5%	90.6%	563	54.3%	86.7%
> 30 miles	124	100.0%	10.5%	13	10.4%	10.0%	35	28.2%	8.8%	76	61.2%	11.7%
Zip Invalid/Missing	14	100.0%	1.1%	2	14.2%	1.5%	2	14.2%	0.5%	10	71.4%	1.5%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	461	100.0%	39.3%	66	14.3%	51.1%	161	34.9%	40.7%	234	50.7%	36.0%
> 30 miles	698	100.0%	59.5%	61	8.7%	47.2%	232	33.2%	58.7%	405	58.0%	62.4%
Zip Invalid/Missing	14	100.0%	1.1%	2	14.2%	1.5%	2	14.2%	0.5%	10	71.4%	1.5%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	17	100.0%	1.4%	4	23.5%	3.1%	2	11.7%	0.5%	11	64.7%	1.6%
50-64 years	85	100.0%	7.2%	25	29.4%	19.3%	16	18.8%	4.0%	44	51.7%	6.7%
≥ 65 years	1,071	100.0%	91.3%	100	9.3%	77.5%	377	35.2%	95.4%	594	55.4%	91.5%
GENDER ¹⁶												
Female	42	100.0%	3.5%	3	7.1%	2.3%	16	38.0%	4.0%	23	54.7%	3.5%
Male	1,131	100.0%	96.4%	126	11.1%	97.6%	379	33.5%	95.9%	626	55.3%	96.4%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	786	100.0%	67.0%	117	14.8%	90.6%	132	16.7%	33.4%	537	68.3%	82.7%
Low Priority	168	100.0%	14.3%	10	5.9%	7.7%	71	42.2%	17.9%	87	51.7%	13.4%
Priority Level Missing	219	100.0%	18.6%	2	0.9%	1.5%	192	87.6%	48.6%	25	11.4%	3.8%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 18 - VA Southwest Health Care Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,162	100.0%	100.0%	148	12.7%	100.0%	328	28.2%	100.0%	686	59.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	584	100.0%	50.2%	64	10.9%	43.2%	157	26.8%	47.8%	363	62.1%	52.9%
Urban	559	100.0%	48.1%	75	13.4%	50.6%	170	30.4%	51.8%	314	56.1%	45.7%
Zip Invalid/Missing	19	100.0%	1.6%	9	47.3%	6.0%	1	5.2%	0.3%	9	47.3%	1.3%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	876	100.0%	75.3%	111	12.6%	75.0%	251	28.6%	76.5%	514	58.6%	74.9%
> 30 miles	267	100.0%	22.9%	28	10.4%	18.9%	76	28.4%	23.1%	163	61.0%	23.7%
Zip Invalid/Missing	19	100.0%	1.6%	9	47.3%	6.0%	1	5.2%	0.3%	9	47.3%	1.3%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	466	100.0%	40.1%	78	16.7%	52.7%	150	32.1%	45.7%	238	51.0%	34.6%
> 30 miles	677	100.0%	58.2%	61	9.0%	41.2%	177	26.1%	53.9%	439	64.8%	63.9%
Zip Invalid/Missing	19	100.0%	1.6%	9	47.3%	6.0%	1	5.2%	0.3%	9	47.3%	1.3%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	18	100.0%	1.5%	3	16.6%	2.0%	0	0	0	15	83.3%	2.1%
50-64 years	61	100.0%	5.2%	23	37.7%	15.5%	8	13.1%	2.4%	30	49.1%	4.3%
≥ 65 years	1,082	100.0%	93.1%	122	11.2%	82.4%	319	29.4%	97.2%	641	59.2%	93.4%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	1	100.0%	0.3%	0	0	0
GENDER ¹⁶												
Female	71	100.0%	6.1%	12	16.9%	8.1%	20	28.1%	6.0%	39	54.9%	5.6%
Male	1,091	100.0%	93.8%	136	12.4%	91.8%	308	28.2%	93.9%	647	59.3%	94.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	762	100.0%	65.5%	124	16.2%	83.7%	121	15.8%	36.8%	517	67.8%	75.3%
Low Priority	226	100.0%	19.4%	12	5.3%	8.1%	82	36.2%	25.0%	132	58.4%	19.2%
Priority Level Missing	174	100.0%	14.9%	12	6.8%	8.1%	125	71.8%	38.1%	37	21.2%	5.3%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 19 - Rocky Mountain Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	744	100.0%	100.0%	95	12.7%	100.0%	234	31.4%	100.0%	415	55.7%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	401	100.0%	53.8%	42	10.4%	44.2%	122	30.4%	52.1%	237	59.1%	57.1%
Urban	313	100.0%	42.0%	45	14.3%	47.3%	112	35.7%	47.8%	156	49.8%	37.5%
Zip Invalid/Missing	30	100.0%	4.0%	8	26.6%	8.4%	0	0	0	22	73.3%	5.3%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	517	100.0%	69.4%	69	13.3%	72.6%	162	31.3%	69.2%	286	55.3%	68.9%
> 30 miles	197	100.0%	26.4%	18	9.1%	18.9%	72	36.5%	30.7%	107	54.3%	25.7%
Zip Invalid/Missing	30	100.0%	4.0%	8	26.6%	8.4%	0	0	0	22	73.3%	5.3%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	218	100.0%	29.3%	45	20.6%	47.3%	66	30.2%	28.2%	107	49.0%	25.7%
> 30 miles	496	100.0%	66.6%	42	8.4%	44.2%	168	33.8%	71.7%	286	57.6%	68.9%
Zip Invalid/Missing	30	100.0%	4.0%	8	26.6%	8.4%	0	0	0	22	73.3%	5.3%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	11	100.0%	1.4%	3	27.2%	3.1%	0	0	0	8	72.7%	1.9%
50-64 years	48	100.0%	6.4%	14	29.1%	14.7%	6	12.5%	2.5%	28	58.3%	6.7%
≥ 65 years	685	100.0%	92.0%	78	11.3%	82.1%	228	33.2%	97.4%	379	55.3%	91.3%
GENDER ¹⁶												
Female	20	100.0%	2.6%	2	10.0%	2.1%	8	40.0%	3.4%	10	50.0%	2.4%
Male	724	100.0%	97.3%	93	12.8%	97.8%	226	31.2%	96.5%	405	55.9%	97.5%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	460	100.0%	61.8%	88	19.1%	92.6%	78	16.9%	33.3%	294	63.9%	70.8%
Low Priority	187	100.0%	25.1%	6	3.2%	6.3%	64	34.2%	27.3%	117	62.5%	28.1%
Priority Level Missing	97	100.0%	13.0%	1	1.0%	1.0%	92	94.8%	39.3%	4	4.1%	0.9%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 20 - Northwest Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	910	100.0%	100.0%	135	14.8%	100.0%	310	34.0%	100.0%	465	51.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	532	100.0%	58.4%	67	12.5%	49.6%	191	35.9%	61.6%	274	51.5%	58.9%
Urban	374	100.0%	41.0%	68	18.1%	50.3%	119	31.8%	38.3%	187	50.0%	40.2%
Zip Invalid/Missing	4	100.0%	0.4%	0	0	0	0	0	0	4	100.0%	0.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	655	100.0%	71.9%	105	16.0%	77.7%	218	33.2%	70.3%	332	50.6%	71.3%
> 30 miles	251	100.0%	27.5%	30	11.9%	22.2%	92	36.6%	29.6%	129	51.3%	27.7%
Zip Invalid/Missing	4	100.0%	0.4%	0	0	0	0	0	0	4	100.0%	0.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	394	100.0%	43.2%	78	19.7%	57.7%	116	29.4%	37.4%	200	50.7%	43.0%
> 30 miles	512	100.0%	56.2%	57	11.1%	42.2%	194	37.8%	62.5%	261	50.9%	56.1%
Zip Invalid/Missing	4	100.0%	0.4%	0	0	0	0	0	0	4	100.0%	0.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	18	100.0%	1.9%	7	38.8%	5.1%	1	5.5%	0.3%	10	55.5%	2.1%
50-64 years	86	100.0%	9.4%	27	31.3%	20.0%	11	12.7%	3.5%	48	55.8%	10.3%
≥ 65 years	806	100.0%	88.5%	101	12.5%	74.8%	298	36.9%	96.1%	407	50.4%	87.5%
GENDER ¹⁶												
Female	44	100.0%	4.8%	10	22.7%	7.4%	12	27.2%	3.8%	22	50.0%	4.7%
Male	866	100.0%	95.1%	125	14.4%	92.5%	298	34.4%	96.1%	443	51.1%	95.2%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	598	100.0%	65.7%	119	19.8%	88.1%	112	18.7%	36.1%	367	61.3%	78.9%
Low Priority	142	100.0%	15.6%	10	7.0%	7.4%	65	45.7%	20.9%	67	47.1%	14.4%
Priority Level Missing	170	100.0%	18.6%	6	3.5%	4.4%	133	78.2%	42.9%	31	18.2%	6.6%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 21 - Sierra Pacific Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,101	100.0%	100.0%	128	11.6%	100.0%	352	31.9%	100.0%	621	56.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	389	100.0%	35.3%	28	7.1%	21.8%	123	31.6%	34.9%	238	61.1%	38.3%
Urban	701	100.0%	63.6%	95	13.5%	74.2%	229	32.6%	65.0%	377	53.7%	60.7%
Zip Invalid/Missing	11	100.0%	0.9%	5	45.4%	3.9%	0	0	0	6	54.5%	0.9%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	995	100.0%	90.3%	116	11.6%	90.6%	322	32.3%	91.4%	557	55.9%	89.6%
> 30 miles	95	100.0%	8.6%	7	7.3%	5.4%	30	31.5%	8.5%	58	61.0%	9.3%
Zip Invalid/Missing	11	100.0%	0.9%	5	45.4%	3.9%	0	0	0	6	54.5%	0.9%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	569	100.0%	51.6%	98	17.2%	76.5%	184	32.3%	52.2%	287	50.4%	46.2%
> 30 miles	521	100.0%	47.3%	25	4.7%	19.5%	168	32.2%	47.7%	328	62.9%	52.8%
Zip Invalid/Missing	11	100.0%	0.9%	5	45.4%	3.9%	0	0	0	6	54.5%	0.9%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	36	100.0%	3.2%	8	22.2%	6.2%	5	13.8%	1.4%	23	63.8%	3.7%
50-64 years	62	100.0%	5.6%	19	30.6%	14.8%	9	14.5%	2.5%	34	54.8%	5.4%
≥ 65 years	1,003	100.0%	91.0%	101	10.0%	78.9%	338	33.6%	96.0%	564	56.2%	90.8%
GENDER ¹⁶												
Female	49	100.0%	4.4%	6	12.2%	4.6%	15	30.6%	4.2%	28	57.1%	4.5%
Male	1,052	100.0%	95.5%	122	11.5%	95.3%	337	32.0%	95.7%	593	56.3%	95.4%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	704	100.0%	63.9%	121	17.1%	94.5%	108	15.3%	30.6%	475	67.4%	76.4%
Low Priority	229	100.0%	20.7%	5	2.1%	3.9%	94	41.0%	26.7%	130	56.7%	20.9%
Priority Level Missing	168	100.0%	15.2%	2	1.1%	1.5%	150	89.2%	42.6%	16	9.5%	2.5%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: 22 - Desert Pacific Healthcare Network

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,120	100.0%	100.0%	110	9.8%	100.0%	434	38.7%	100.0%	576	51.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	155	100.0%	13.8%	15	9.6%	13.6%	56	36.1%	12.9%	84	54.1%	14.5%
Urban	953	100.0%	85.0%	91	9.5%	82.7%	376	39.4%	86.6%	486	50.9%	84.3%
Zip Invalid/Missing	12	100.0%	1.0%	4	33.3%	3.6%	2	16.6%	0.4%	6	50.0%	1.0%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,078	100.0%	96.2%	103	9.5%	93.6%	427	39.6%	98.3%	548	50.8%	95.1%
> 30 miles	30	100.0%	2.6%	3	10.0%	2.7%	5	16.6%	1.1%	22	73.3%	3.8%
Zip Invalid/Missing	12	100.0%	1.0%	4	33.3%	3.6%	2	16.6%	0.4%	6	50.0%	1.0%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	926	100.0%	82.6%	97	10.4%	88.1%	352	38.0%	81.1%	477	51.5%	82.8%
> 30 miles	182	100.0%	16.2%	9	4.9%	8.1%	80	43.9%	18.4%	93	51.0%	16.1%
Zip Invalid/Missing	12	100.0%	1.0%	4	33.3%	3.6%	2	16.6%	0.4%	6	50.0%	1.0%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	37	100.0%	3.3%	7	18.9%	6.3%	6	16.2%	1.3%	24	64.8%	4.1%
50-64 years	75	100.0%	6.6%	15	20.0%	13.6%	17	22.6%	3.9%	43	57.3%	7.4%
≥ 65 years	1,007	100.0%	89.9%	88	8.7%	80.0%	411	40.8%	94.7%	508	50.4%	88.1%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	0	0	0	1	100.0%	0.1%
GENDER ¹⁶												
Female	42	100.0%	3.7%	1	2.3%	0.9%	19	45.2%	4.3%	22	52.3%	3.8%
Male	1,078	100.0%	96.2%	109	10.1%	99.0%	415	38.4%	95.6%	554	51.3%	96.1%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	679	100.0%	60.6%	96	14.1%	87.2%	130	19.1%	29.9%	453	66.7%	78.6%
Low Priority	213	100.0%	19.0%	13	6.1%	11.8%	93	43.6%	21.4%	107	50.2%	18.5%
Priority Level Missing	228	100.0%	20.3%	1	0.4%	0.9%	211	92.5%	48.6%	16	7.0%	2.7%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer

VHA VISN ¹²: No VISN data available

Colorectal Cancer Cohort	Medicare Enrolled Veterans (FFS only) ⁶			TYPE OF HEALTHCARE USE					
				Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	132	100.0%	100.0%	125	94.6%	100.0%	7	5.3%	100.0%
TYPE OF ZIP CODE ¹³									
Zip Invalid/Missing	132	100.0%	100.0%	125	94.6%	100.0%	7	5.3%	100.0%
OUTPATIENT DISTANCE ¹⁴									
Zip Invalid/Missing	132	100.0%	100.0%	125	94.6%	100.0%	7	5.3%	100.0%
INPATIENT DISTANCE ¹⁴									
Zip Invalid/Missing	132	100.0%	100.0%	125	94.6%	100.0%	7	5.3%	100.0%
AGE AS OF 01/01/1999 ¹⁵									
50-64 years	4	100.0%	3.0%	4	100.0%	3.2%	0	0	0
≥ 65 years	128	100.0%	96.9%	121	94.5%	96.8%	7	5.4%	100.0%
GENDER ¹⁶									
Female	1	100.0%	0.7%	1	100.0%	0.8%	0	0	0
Male	131	100.0%	99.2%	124	94.6%	99.2%	7	5.3%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷									
High Priority	6	100.0%	4.5%	6	100.0%	4.8%	0	0	0
Low Priority	2	100.0%	1.5%	2	100.0%	1.6%	0	0	0
Priority Level Missing	124	100.0%	93.9%	117	94.3%	93.6%	7	5.6%	100.0%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

**Table 7 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with Colorectal Cancer
Variable Definitions and Descriptions**

6. Medicare Enrolled Veterans (FFS only) in Colorectal Cancer Cohort: Included veterans who met at least one of the following criteria from fiscal year 1997 through 2000: used VHA services, enrolled in the VHA health system, or received compensation or pension benefits from the VA. The file draws from several data sources:

- Office of Policy and Planning (OPP) Enrollment File as of December 1999,
- VISN Support Service Center (VSSC) Unique User File for October 1997-September 2000,
- Veterans Benefits Administration (VBA) Compensation and Pension Non-Users File, and
- The Allocation Resource Center (ARC) Pharmacy Only Users File from October 1997-September 1999.

Demographic information for each veteran, used for comparing to the Medicare demographic data during the match process, was also obtained from these sources.

This column included the veterans in the CMS Denominator file (eligible for Medicare benefits during CY 1999) whose SSN matched an SSN in the above sampling frame, and who also matched on gender and at least 2 of the 3 parts of the date of birth (month/year, day/year, month/day), and who were alive as of January 1, 1999. These veterans were also not enrolled in a Medicare + Choice plan at any time during 1999 and had a diagnosis of colorectal cancer (ICD-9-CM=153 – 154.8) during 1999 in one of the following datasets: VA Inpatient Main, VA Outpatient Diagnosis, VA Fee Basis Inpatient, VA Fee Basis Outpatient; CMS Part A MedPAR, CMS Part A Outpatient, or CMS Part B Carrier.

8. Used only VA services: Had at least one occurrence in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient; and no occurrences in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier.

9. Used only Medicare services: Had at least one occurrence in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier; and no occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

10. Used both services: Had at least one occurrence in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier; and at least one occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

11. Used neither service: Had no occurrence in any of these CMS claims files: Part A MedPAR, Outpatient, Part B Carrier; and no occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

12. VISN: Veteran's Integrated Service Network is based on the zip code of the veteran's residence. See Appendix E, Section I for details.

13. Type of zip code: Urban/Rural designation. See Appendix E, Section I for details.

14. Outpatient and inpatient distance: Distance between veteran's residence zip code and the nearest inpatient and outpatient VA facility. See Appendix E, Section I for details.

15. Age: Veteran's age as of 01/01/1999. See Appendix E, Section II for details.

16. Gender: Sex of the veteran. See Appendix E, Section III for details.

17. Constructed Priority Level: This variable was constructed by VIREC based on three different variables: "Priority Level", "Means Test", and "Service Connected Status". High Priority includes veterans with "Priority Level" 1-6, "Means Test" Category A, or "Service Connected Status" 10-100%. Low Priority includes veterans with "Priority Level" 7 or "Means Test" Category C. See Appendix E, Section IV for details.

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

NATIONAL SUMMARY

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	24,466	100.0%	100.0%	2,300	9.4%	100.0%	7,465	30.5%	100.0%	14,680	60.0%	100.0%	21	0.0%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	9,764	100.0%	39.9%	696	7.1%	30.2%	2,910	29.8%	38.9%	6,149	62.9%	41.8%	9	0.0%	42.8%
Urban	13,922	100.0%	56.9%	1,474	10.5%	64.0%	4,423	31.7%	59.2%	8,014	57.5%	54.5%	11	0.0%	52.3%
Zip Invalid/Missing	780	100.0%	3.1%	130	16.6%	5.6%	132	16.9%	1.7%	517	66.2%	3.5%	1	0.1%	4.7%
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	20,293	100.0%	82.9%	1,953	9.6%	84.9%	6,274	30.9%	84.0%	12,047	59.3%	82.0%	19	0.0%	90.4%
> 30 miles	3,393	100.0%	13.8%	217	6.3%	9.4%	1,059	31.2%	14.1%	2,116	62.3%	14.4%	1	0.0%	4.7%
Zip Invalid/Missing	780	100.0%	3.1%	130	16.6%	5.6%	132	16.9%	1.7%	517	66.2%	3.5%	1	0.1%	4.7%
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	13,524	100.0%	55.2%	1,646	12.1%	71.5%	4,122	30.4%	55.2%	7,741	57.2%	52.7%	15	0.1%	71.4%
> 30 miles	10,162	100.0%	41.5%	524	5.1%	22.7%	3,211	31.5%	43.0%	6,422	63.1%	43.7%	5	0.0%	23.8%
Zip Invalid/Missing	780	100.0%	3.1%	130	16.6%	5.6%	132	16.9%	1.7%	517	66.2%	3.5%	1	0.1%	4.7%
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	2,762	100.0%	11.2%	442	16.0%	19.2%	674	24.4%	9.0%	1,644	59.5%	11.1%	2	0.0%	9.5%
50-64 years	6,321	100.0%	25.8%	826	13.0%	35.9%	1,570	24.8%	21.0%	3,921	62.0%	26.7%	4	0.0%	19.0%
≥ 65 years	15,382	100.0%	62.8%	1,032	6.7%	44.8%	5,220	33.9%	69.9%	9,115	59.2%	62.0%	15	0.0%	71.4%
Invalid/Missing Age	1	100.0%	0.0%	0	0	0	1	100.0%	0.0%	0	0	0	0	0	0
GENDER ¹⁶															
Female	564	100.0%	2.3%	49	8.6%	2.1%	272	48.2%	3.6%	237	42.0%	1.6%	6	1.0%	28.5%
Male	23,902	100.0%	97.6%	2,251	9.4%	97.8%	7,193	30.0%	96.3%	14,443	60.4%	98.3%	15	0.0%	71.4%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	18,540	100.0%	75.7%	2,185	11.7%	95.0%	3,434	18.5%	46.0%	12,913	69.6%	87.9%	8	0.0%	38.0%
Low Priority	2,925	100.0%	11.9%	101	3.4%	4.3%	1,217	41.6%	16.3%	1,604	54.8%	10.9%	3	0.1%	14.2%
Priority Level Missing	3,001	100.0%	12.2%	14	0.4%	0.6%	2,814	93.7%	37.6%	163	5.4%	1.1%	10	0.3%	47.6%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 1 - VA New England Healthcare System

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,052	100.0%	100.0%	87	8.2%	100.0%	353	33.5%	100.0%	612	58.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	362	100.0%	34.4%	31	8.5%	35.6%	105	29.0%	29.7%	226	62.4%	36.9%
Urban	676	100.0%	64.2%	54	7.9%	62.0%	248	36.6%	70.2%	374	55.3%	61.1%
Zip Invalid/Missing	14	100.0%	1.3%	2	14.2%	2.2%	0	0	0	12	85.7%	1.9%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,012	100.0%	96.1%	83	8.2%	95.4%	346	34.1%	98.0%	583	57.6%	95.2%
> 30 miles	26	100.0%	2.4%	2	7.6%	2.2%	7	26.9%	1.9%	17	65.3%	2.7%
Zip Invalid/Missing	14	100.0%	1.3%	2	14.2%	2.2%	0	0	0	12	85.7%	1.9%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	778	100.0%	73.9%	77	9.8%	88.5%	260	33.4%	73.6%	441	56.6%	72.0%
> 30 miles	260	100.0%	24.7%	8	3.0%	9.1%	93	35.7%	26.3%	159	61.1%	25.9%
Zip Invalid/Missing	14	100.0%	1.3%	2	14.2%	2.2%	0	0	0	12	85.7%	1.9%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	69	100.0%	6.5%	14	20.2%	16.0%	12	17.3%	3.3%	43	62.3%	7.0%
50-64 years	215	100.0%	20.4%	23	10.6%	26.4%	63	29.3%	17.8%	129	60.0%	21.0%
≥ 65 years	768	100.0%	73.0%	50	6.5%	57.4%	278	36.1%	78.7%	440	57.2%	71.8%
GENDER ¹⁶												
Female	32	100.0%	3.0%	2	6.2%	2.2%	12	37.5%	3.3%	18	56.2%	2.9%
Male	1,020	100.0%	96.9%	85	8.3%	97.7%	341	33.4%	96.6%	594	58.2%	97.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	765	100.0%	72.7%	82	10.7%	94.2%	148	19.3%	41.9%	535	69.9%	87.4%
Low Priority	134	100.0%	12.7%	5	3.7%	5.7%	55	41.0%	15.5%	74	55.2%	12.0%
Priority Level Missing	153	100.0%	14.5%	0	0	0	150	98.0%	42.4%	3	1.9%	0.4%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 2 - VA Healthcare Network Upstate New York

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	619	100.0%	100.0%	56	9.0%	100.0%	188	30.3%	100.0%	374	60.4%	100.0%	1	0.1%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	327	100.0%	52.8%	26	7.9%	46.4%	103	31.4%	54.7%	198	60.5%	52.9%	0	0	0
Urban	282	100.0%	45.5%	27	9.5%	48.2%	85	30.1%	45.2%	169	59.9%	45.1%	1	0.3%	100.0%
Zip Invalid/Missing	10	100.0%	1.6%	3	30.0%	5.3%	0	0	0	7	70.0%	1.8%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	603	100.0%	97.4%	53	8.7%	94.6%	185	30.6%	98.4%	364	60.3%	97.3%	1	0.1%	100.0%
> 30 miles	6	100.0%	0.9%	0	0	0	3	50.0%	1.5%	3	50.0%	0.8%	0	0	0
Zip Invalid/Missing	10	100.0%	1.6%	3	30.0%	5.3%	0	0	0	7	70.0%	1.8%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	378	100.0%	61.0%	42	11.1%	75.0%	111	29.3%	59.0%	224	59.2%	59.8%	1	0.2%	100.0%
> 30 miles	231	100.0%	37.3%	11	4.7%	19.6%	77	33.3%	40.9%	143	61.9%	38.2%	0	0	0
Zip Invalid/Missing	10	100.0%	1.6%	3	30.0%	5.3%	0	0	0	7	70.0%	1.8%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	51	100.0%	8.2%	11	21.5%	19.6%	10	19.6%	5.3%	30	58.8%	8.0%	0	0	0
50-64 years	126	100.0%	20.3%	16	12.6%	28.5%	24	19.0%	12.7%	86	68.2%	22.9%	0	0	0
≥ 65 years	442	100.0%	71.4%	29	6.5%	51.7%	154	34.8%	81.9%	258	58.3%	68.9%	1	0.2%	100.0%
GENDER ¹⁶															
Female	14	100.0%	2.2%	0	0	0	6	42.8%	3.1%	8	57.1%	2.1%	0	0	0
Male	605	100.0%	97.7%	56	9.2%	100.0%	182	30.0%	96.8%	366	60.4%	97.8%	1	0.1%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	470	100.0%	75.9%	51	10.8%	91.0%	98	20.8%	52.1%	320	68.0%	85.5%	1	0.2%	100.0%
Low Priority	97	100.0%	15.6%	5	5.1%	8.9%	41	42.2%	21.8%	51	52.5%	13.6%	0	0	0
Priority Level Missing	52	100.0%	8.4%	0	0	0	49	94.2%	26.0%	3	5.7%	0.8%	0	0	0

Note: See attached footnotes for variable definitions and descriptions.
VIRc, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 3 - VA NY/NJ Veterans Healthcare Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,513	100.0%	100.0%	119	7.8%	100.0%	607	40.1%	100.0%	786	51.9%	100.0%	1	0.0%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	112	100.0%	7.4%	3	2.6%	2.5%	58	51.7%	9.5%	51	45.5%	6.4%	0	0	0
Urban	1,392	100.0%	92.0%	113	8.1%	94.9%	548	39.3%	90.2%	730	52.4%	92.8%	1	0.0%	100.0%
Zip Invalid/Missing	9	100.0%	0.5%	3	33.3%	2.5%	1	11.1%	0.1%	5	55.5%	0.6%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	1,504	100.0%	99.4%	116	7.7%	97.4%	606	40.2%	99.8%	781	51.9%	99.3%	1	0.0%	100.0%
Zip Invalid/Missing	9	100.0%	0.5%	3	33.3%	2.5%	1	11.1%	0.1%	5	55.5%	0.6%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	1,416	100.0%	93.5%	116	8.1%	97.4%	561	39.6%	92.4%	738	52.1%	93.8%	1	0.0%	100.0%
> 30 miles	88	100.0%	5.8%	0	0	0	45	51.1%	7.4%	43	48.8%	5.4%	0	0	0
Zip Invalid/Missing	9	100.0%	0.5%	3	33.3%	2.5%	1	11.1%	0.1%	5	55.5%	0.6%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	112	100.0%	7.4%	15	13.3%	12.6%	36	32.1%	5.9%	61	54.4%	7.7%	0	0	0
50-64 years	297	100.0%	19.6%	31	10.4%	26.0%	105	35.3%	17.2%	161	54.2%	20.4%	0	0	0
≥ 65 years	1,104	100.0%	72.9%	73	6.6%	61.3%	466	42.2%	76.7%	564	51.0%	71.7%	1	0.0%	100.0%
GENDER ¹⁶															
Female	17	100.0%	1.1%	0	0	0	9	52.9%	1.4%	8	47.0%	1.0%	0	0	0
Male	1,496	100.0%	98.8%	119	7.9%	100.0%	598	39.9%	98.5%	778	52.0%	98.9%	1	0.0%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	927	100.0%	61.2%	108	11.6%	90.7%	253	27.2%	41.6%	566	61.0%	72.0%	0	0	0
Low Priority	396	100.0%	26.1%	11	2.7%	9.2%	169	42.6%	27.8%	215	54.2%	27.3%	1	0.2%	100.0%
Priority Level Missing	190	100.0%	12.5%	0	0	0	185	97.3%	30.4%	5	2.6%	0.6%	0	0	0

Note: See attached footnotes for variable definitions and descriptions.
VIRc, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 4 - VA Stars & Stripes Healthcare Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,364	100.0%	100.0%	90	6.5%	100.0%	504	36.9%	100.0%	767	56.2%	100.0%	3	0.2%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	575	100.0%	42.1%	31	5.3%	34.4%	205	35.6%	40.6%	338	58.7%	44.0%	1	0.1%	33.3%
Urban	777	100.0%	56.9%	57	7.3%	63.3%	299	38.4%	59.3%	419	53.9%	54.6%	2	0.2%	66.6%
Zip Invalid/Missing	12	100.0%	0.8%	2	16.6%	2.2%	0	0	0	10	83.3%	1.3%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	1,331	100.0%	97.5%	88	6.6%	97.7%	495	37.1%	98.2%	745	55.9%	97.1%	3	0.2%	100.0%
> 30 miles	21	100.0%	1.5%	0	0	0	9	42.8%	1.7%	12	57.1%	1.5%	0	0	0
Zip Invalid/Missing	12	100.0%	0.8%	2	16.6%	2.2%	0	0	0	10	83.3%	1.3%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	948	100.0%	69.5%	71	7.4%	78.8%	356	37.5%	70.6%	518	54.6%	67.5%	3	0.3%	100.0%
> 30 miles	404	100.0%	29.6%	17	4.2%	18.8%	148	36.6%	29.3%	239	59.1%	31.1%	0	0	0
Zip Invalid/Missing	12	100.0%	0.8%	2	16.6%	2.2%	0	0	0	10	83.3%	1.3%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	125	100.0%	9.1%	14	11.2%	15.5%	28	22.4%	5.5%	83	66.4%	10.8%	0	0	0
50-64 years	338	100.0%	24.7%	43	12.7%	47.7%	99	29.2%	19.6%	194	57.3%	25.2%	2	0.5%	66.6%
≥ 65 years	901	100.0%	66.0%	33	3.6%	36.6%	377	41.8%	74.8%	490	54.3%	63.8%	1	0.1%	33.3%
GENDER ¹⁶															
Female	27	100.0%	1.9%	3	11.1%	3.3%	15	55.5%	2.9%	9	33.3%	1.1%	0	0	0
Male	1,337	100.0%	98.0%	87	6.5%	96.6%	489	36.5%	97.0%	758	56.6%	98.8%	3	0.2%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	972	100.0%	71.2%	79	8.1%	87.7%	244	25.1%	48.4%	646	66.4%	84.2%	3	0.3%	100.0%
Low Priority	207	100.0%	15.1%	10	4.8%	11.1%	80	38.6%	15.8%	117	56.5%	15.2%	0	0	0
Priority Level Missing	185	100.0%	13.5%	1	0.5%	1.1%	180	97.2%	35.7%	4	2.1%	0.5%	0	0	0

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 5 - VA Capital Health Care Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	769	100.0%	100.0%	62	8.0%	100.0%	261	33.9%	100.0%	444	57.7%	100.0%	2	0.2%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	198	100.0%	25.7%	14	7.0%	22.5%	72	36.3%	27.5%	112	56.5%	25.2%	0	0	0
Urban	553	100.0%	71.9%	44	7.9%	70.9%	189	34.1%	72.4%	318	57.5%	71.6%	2	0.3%	100.0%
Zip Invalid/Missing	18	100.0%	2.3%	4	22.2%	6.4%	0	0	0	14	77.7%	3.1%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	744	100.0%	96.7%	58	7.7%	93.5%	257	34.5%	98.4%	427	57.3%	96.1%	2	0.2%	100.0%
> 30 miles	7	100.0%	0.9%	0	0	0	4	57.1%	1.5%	3	42.8%	0.6%	0	0	0
Zip Invalid/Missing	18	100.0%	2.3%	4	22.2%	6.4%	0	0	0	14	77.7%	3.1%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	648	100.0%	84.2%	55	8.4%	88.7%	219	33.7%	83.9%	372	57.4%	83.7%	2	0.3%	100.0%
> 30 miles	103	100.0%	13.3%	3	2.9%	4.8%	42	40.7%	16.0%	58	56.3%	13.0%	0	0	0
Zip Invalid/Missing	18	100.0%	2.3%	4	22.2%	6.4%	0	0	0	14	77.7%	3.1%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	110	100.0%	14.3%	10	9.0%	16.1%	30	27.2%	11.4%	70	63.6%	15.7%	0	0	0
50-64 years	200	100.0%	26.0%	17	8.5%	27.4%	62	31.0%	23.7%	120	60.0%	27.0%	1	0.5%	50.0%
≥ 65 years	459	100.0%	59.6%	35	7.6%	56.4%	169	36.8%	64.7%	254	55.3%	57.2%	1	0.2%	50.0%
GENDER ¹⁶															
Female	14	100.0%	1.8%	1	7.1%	1.6%	9	64.2%	3.4%	4	28.5%	0.9%	0	0	0
Male	755	100.0%	98.1%	61	8.0%	98.3%	252	33.3%	96.5%	440	58.2%	99.0%	2	0.2%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	580	100.0%	75.4%	61	10.5%	98.3%	118	20.3%	45.2%	401	69.1%	90.3%	0	0	0
Low Priority	81	100.0%	10.5%	0	0	0	41	50.6%	15.7%	40	49.3%	9.0%	0	0	0
Priority Level Missing	108	100.0%	14.0%	1	0.9%	1.6%	102	94.4%	39.0%	3	2.7%	0.6%	2	1.8%	100.0%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 6 - The Mid-Atlantic Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,637	100.0%	100.0%	156	9.5%	100.0%	540	32.9%	100.0%	939	57.3%	100.0%	2	0.1%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	840	100.0%	51.3%	70	8.3%	44.8%	275	32.7%	50.9%	495	58.9%	52.7%	0	0	0
Urban	747	100.0%	45.6%	78	10.4%	50.0%	265	35.4%	49.0%	402	53.8%	42.8%	2	0.2%	100.0%
Zip Invalid/Missing	50	100.0%	3.0%	8	16.0%	5.1%	0	0	0	42	84.0%	4.4%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	1,191	100.0%	72.7%	120	10.0%	76.9%	399	33.5%	73.8%	670	56.2%	71.3%	2	0.1%	100.0%
> 30 miles	396	100.0%	24.1%	28	7.0%	17.9%	141	35.6%	26.1%	227	57.3%	24.1%	0	0	0
Zip Invalid/Missing	50	100.0%	3.0%	8	16.0%	5.1%	0	0	0	42	84.0%	4.4%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	822	100.0%	50.2%	99	12.0%	63.4%	256	31.1%	47.4%	465	56.5%	49.5%	2	0.2%	100.0%
> 30 miles	765	100.0%	46.7%	49	6.4%	31.4%	284	37.1%	52.5%	432	56.4%	46.0%	0	0	0
Zip Invalid/Missing	50	100.0%	3.0%	8	16.0%	5.1%	0	0	0	42	84.0%	4.4%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	232	100.0%	14.1%	40	17.2%	25.6%	69	29.7%	12.7%	122	52.5%	12.9%	1	0.4%	50.0%
50-64 years	468	100.0%	28.5%	52	11.1%	33.3%	120	25.6%	22.2%	296	63.2%	31.5%	0	0	0
≥ 65 years	937	100.0%	57.2%	64	6.8%	41.0%	351	37.4%	65.0%	521	55.6%	55.4%	1	0.1%	50.0%
GENDER ¹⁶															
Female	45	100.0%	2.7%	2	4.4%	1.2%	23	51.1%	4.2%	20	44.4%	2.1%	0	0	0
Male	1,592	100.0%	97.2%	154	9.6%	98.7%	517	32.4%	95.7%	919	57.7%	97.8%	2	0.1%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	1,252	100.0%	76.4%	155	12.3%	99.3%	244	19.4%	45.1%	852	68.0%	90.7%	1	0.0%	50.0%
Low Priority	141	100.0%	8.6%	1	0.7%	0.6%	66	46.8%	12.2%	74	52.4%	7.8%	0	0	0
Priority Level Missing	244	100.0%	14.9%	0	0	0	230	94.2%	42.5%	13	5.3%	1.3%	1	0.4%	50.0%

Note: See attached footnotes for variable definitions and descriptions.
VIRc, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 7 - The Atlanta Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,731	100.0%	100.0%	105	6.0%	100.0%	511	29.5%	100.0%	1,112	64.2%	100.0%	3	0.1%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	829	100.0%	47.8%	32	3.8%	30.4%	254	30.6%	49.7%	540	65.1%	48.5%	3	0.3%	100.0%
Urban	842	100.0%	48.6%	66	7.8%	62.8%	256	30.4%	50.0%	520	61.7%	46.7%	0	0	0
Zip Invalid/Missing	60	100.0%	3.4%	7	11.6%	6.6%	1	1.6%	0.1%	52	86.6%	4.6%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	1,256	100.0%	72.5%	79	6.2%	75.2%	390	31.0%	76.3%	784	62.4%	70.5%	3	0.2%	100.0%
> 30 miles	415	100.0%	23.9%	19	4.5%	18.0%	120	28.9%	23.4%	276	66.5%	24.8%	0	0	0
Zip Invalid/Missing	60	100.0%	3.4%	7	11.6%	6.6%	1	1.6%	0.1%	52	86.6%	4.6%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	709	100.0%	40.9%	68	9.5%	64.7%	198	27.9%	38.7%	441	62.2%	39.6%	2	0.2%	66.6%
> 30 miles	962	100.0%	55.5%	30	3.1%	28.5%	312	32.4%	61.0%	619	64.3%	55.6%	1	0.1%	33.3%
Zip Invalid/Missing	60	100.0%	3.4%	7	11.6%	6.6%	1	1.6%	0.1%	52	86.6%	4.6%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	295	100.0%	17.0%	33	11.1%	31.4%	75	25.4%	14.6%	187	63.3%	16.8%	0	0	0
50-64 years	469	100.0%	27.0%	48	10.2%	45.7%	98	20.8%	19.1%	323	68.8%	29.0%	0	0	0
≥ 65 years	967	100.0%	55.8%	24	2.4%	22.8%	338	34.9%	66.1%	602	62.2%	54.1%	3	0.3%	100.0%
GENDER ¹⁶															
Female	44	100.0%	2.5%	4	9.0%	3.8%	26	59.0%	5.0%	12	27.2%	1.0%	2	4.5%	66.6%
Male	1,687	100.0%	97.4%	101	5.9%	96.1%	485	28.7%	94.9%	1,100	65.2%	98.9%	1	0.0%	33.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	1,347	100.0%	77.8%	103	7.6%	98.0%	243	18.0%	47.5%	1,001	74.3%	90.0%	0	0	0
Low Priority	168	100.0%	9.7%	1	0.5%	0.9%	63	37.5%	12.3%	103	61.3%	9.2%	1	0.5%	33.3%
Priority Level Missing	216	100.0%	12.4%	1	0.4%	0.9%	205	94.9%	40.1%	8	3.7%	0.7%	2	0.9%	66.6%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 8 - VA Sunshine Healthcare Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,776	100.0%	100.0%	174	9.7%	100.0%	488	27.4%	100.0%	1,113	62.6%	100.0%	1	0.0%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	733	100.0%	41.2%	72	9.8%	41.3%	174	23.7%	35.6%	486	66.3%	43.6%	1	0.1%	100.0%
Urban	956	100.0%	53.8%	84	8.7%	48.2%	310	32.4%	63.5%	562	58.7%	50.4%	0	0	0
Zip Invalid/Missing	87	100.0%	4.8%	18	20.6%	10.3%	4	4.5%	0.8%	65	74.7%	5.8%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	1,595	100.0%	89.8%	155	9.7%	89.0%	456	28.5%	93.4%	983	61.6%	88.3%	1	0.0%	100.0%
> 30 miles	94	100.0%	5.2%	1	1.0%	0.5%	28	29.7%	5.7%	65	69.1%	5.8%	0	0	0
Zip Invalid/Missing	87	100.0%	4.8%	18	20.6%	10.3%	4	4.5%	0.8%	65	74.7%	5.8%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	853	100.0%	48.0%	117	13.7%	67.2%	232	27.1%	47.5%	504	59.0%	45.2%	0	0	0
> 30 miles	836	100.0%	47.0%	39	4.6%	22.4%	252	30.1%	51.6%	544	65.0%	48.8%	1	0.1%	100.0%
Zip Invalid/Missing	87	100.0%	4.8%	18	20.6%	10.3%	4	4.5%	0.8%	65	74.7%	5.8%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	185	100.0%	10.4%	38	20.5%	21.8%	31	16.7%	6.3%	116	62.7%	10.4%	0	0	0
50-64 years	425	100.0%	23.9%	61	14.3%	35.0%	87	20.4%	17.8%	276	64.9%	24.7%	1	0.2%	100.0%
≥ 65 years	1,166	100.0%	65.6%	75	6.4%	43.1%	370	31.7%	75.8%	721	61.8%	64.7%	0	0	0
GENDER ¹⁶															
Female	39	100.0%	2.1%	3	7.6%	1.7%	12	30.7%	2.4%	24	61.5%	2.1%	0	0	0
Male	1,737	100.0%	97.8%	171	9.8%	98.2%	476	27.4%	97.5%	1,089	62.6%	97.8%	1	0.0%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	1,360	100.0%	76.5%	169	12.4%	97.1%	197	14.4%	40.3%	993	73.0%	89.2%	1	0.0%	100.0%
Low Priority	214	100.0%	12.0%	4	1.8%	2.2%	96	44.8%	19.6%	114	53.2%	10.2%	0	0	0
Priority Level Missing	202	100.0%	11.3%	1	0.4%	0.5%	195	96.5%	39.9%	6	2.9%	0.5%	0	0	0

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 9 - VA Mid South Healthcare Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,227	100.0%	100.0%	168	13.6%	100.0%	265	21.5%	100.0%	794	64.7%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	708	100.0%	57.7%	75	10.5%	44.6%	181	25.5%	68.3%	452	63.8%	56.9%
Urban	452	100.0%	36.8%	80	17.6%	47.6%	84	18.5%	31.6%	288	63.7%	36.2%
Zip Invalid/Missing	67	100.0%	5.4%	13	19.4%	7.7%	0	0	0	54	80.5%	6.8%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	808	100.0%	65.8%	122	15.0%	72.6%	168	20.7%	63.3%	518	64.1%	65.2%
> 30 miles	352	100.0%	28.6%	33	9.3%	19.6%	97	27.5%	36.6%	222	63.0%	27.9%
Zip Invalid/Missing	67	100.0%	5.4%	13	19.4%	7.7%	0	0	0	54	80.5%	6.8%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	508	100.0%	41.4%	97	19.0%	57.7%	86	16.9%	32.4%	325	63.9%	40.9%
> 30 miles	652	100.0%	53.1%	58	8.8%	34.5%	179	27.4%	67.5%	415	63.6%	52.2%
Zip Invalid/Missing	67	100.0%	5.4%	13	19.4%	7.7%	0	0	0	54	80.5%	6.8%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	152	100.0%	12.3%	33	21.7%	19.6%	18	11.8%	6.7%	101	66.4%	12.7%
50-64 years	315	100.0%	25.6%	61	19.3%	36.3%	45	14.2%	16.9%	209	66.3%	26.3%
≥ 65 years	760	100.0%	61.9%	74	9.7%	44.0%	202	26.5%	76.2%	484	63.6%	60.9%
GENDER ¹⁶												
Female	22	100.0%	1.7%	1	4.5%	0.5%	8	36.3%	3.0%	13	59.0%	1.6%
Male	1,205	100.0%	98.2%	167	13.8%	99.4%	257	21.3%	96.9%	781	64.8%	98.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,015	100.0%	82.7%	159	15.6%	94.6%	136	13.3%	51.3%	720	70.9%	90.6%
Low Priority	95	100.0%	7.7%	9	9.4%	5.3%	23	24.2%	8.6%	63	66.3%	7.9%
Priority Level Missing	117	100.0%	9.5%	0	0	0	106	90.5%	40.0%	11	9.4%	1.3%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 10 - VA Healthcare System of Ohio

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	879	100.0%	100.0%	63	7.1%	100.0%	300	34.1%	100.0%	516	58.7%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	298	100.0%	33.9%	16	5.3%	25.3%	98	32.8%	32.6%	184	61.7%	35.6%
Urban	572	100.0%	65.0%	45	7.8%	71.4%	202	35.3%	67.3%	325	56.8%	62.9%
Zip Invalid/Missing	9	100.0%	1.0%	2	22.2%	3.1%	0	0	0	7	77.7%	1.3%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	845	100.0%	96.1%	58	6.8%	92.0%	294	34.7%	98.0%	493	58.3%	95.5%
> 30 miles	25	100.0%	2.8%	3	12.0%	4.7%	6	24.0%	2.0%	16	64.0%	3.1%
Zip Invalid/Missing	9	100.0%	1.0%	2	22.2%	3.1%	0	0	0	7	77.7%	1.3%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	489	100.0%	55.6%	44	8.9%	69.8%	179	36.6%	59.6%	266	54.3%	51.5%
> 30 miles	381	100.0%	43.3%	17	4.4%	26.9%	121	31.7%	40.3%	243	63.7%	47.0%
Zip Invalid/Missing	9	100.0%	1.0%	2	22.2%	3.1%	0	0	0	7	77.7%	1.3%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	97	100.0%	11.0%	13	13.4%	20.6%	28	28.8%	9.3%	56	57.7%	10.8%
50-64 years	216	100.0%	24.5%	26	12.0%	41.2%	56	25.9%	18.6%	134	62.0%	25.9%
≥ 65 years	566	100.0%	64.3%	24	4.2%	38.0%	216	38.1%	72.0%	326	57.5%	63.1%
GENDER ¹⁶												
Female	13	100.0%	1.4%	1	7.6%	1.5%	7	53.8%	2.3%	5	38.4%	0.9%
Male	866	100.0%	98.5%	62	7.1%	98.4%	293	33.8%	97.6%	511	59.0%	99.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	696	100.0%	79.1%	59	8.4%	93.6%	168	24.1%	56.0%	469	67.3%	90.8%
Low Priority	90	100.0%	10.2%	3	3.3%	4.7%	42	46.6%	14.0%	45	50.0%	8.7%
Priority Level Missing	93	100.0%	10.5%	1	1.0%	1.5%	90	96.7%	30.0%	2	2.1%	0.3%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 11 - Veterans In Partnership

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,236	100.0%	100.0%	114	9.2%	100.0%	387	31.3%	100.0%	733	59.3%	100.0%	2	0.1%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	451	100.0%	36.4%	28	6.2%	24.5%	156	34.5%	40.3%	265	58.7%	36.1%	2	0.4%	100.0%
Urban	769	100.0%	62.2%	82	10.6%	71.9%	230	29.9%	59.4%	457	59.4%	62.3%	0	0	0
Zip Invalid/Missing	16	100.0%	1.2%	4	25.0%	3.5%	1	6.2%	0.2%	11	68.7%	1.5%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	1,045	100.0%	84.5%	98	9.3%	85.9%	319	30.5%	82.4%	626	59.9%	85.4%	2	0.1%	100.0%
> 30 miles	175	100.0%	14.1%	12	6.8%	10.5%	67	38.2%	17.3%	96	54.8%	13.0%	0	0	0
Zip Invalid/Missing	16	100.0%	1.2%	4	25.0%	3.5%	1	6.2%	0.2%	11	68.7%	1.5%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	632	100.0%	51.1%	85	13.4%	74.5%	202	31.9%	52.1%	344	54.4%	46.9%	1	0.1%	50.0%
> 30 miles	588	100.0%	47.5%	25	4.2%	21.9%	184	31.2%	47.5%	378	64.2%	51.5%	1	0.1%	50.0%
Zip Invalid/Missing	16	100.0%	1.2%	4	25.0%	3.5%	1	6.2%	0.2%	11	68.7%	1.5%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	131	100.0%	10.5%	19	14.5%	16.6%	37	28.2%	9.5%	75	57.2%	10.2%	0	0	0
50-64 years	302	100.0%	24.4%	48	15.8%	42.1%	83	27.4%	21.4%	171	56.6%	23.3%	0	0	0
≥ 65 years	803	100.0%	64.9%	47	5.8%	41.2%	267	33.2%	68.9%	487	60.6%	66.4%	2	0.2%	100.0%
GENDER ¹⁶															
Female	22	100.0%	1.7%	3	13.6%	2.6%	8	36.3%	2.0%	10	45.4%	1.3%	1	4.5%	50.0%
Male	1,214	100.0%	98.2%	111	9.1%	97.3%	379	31.2%	97.9%	723	59.5%	98.6%	1	0.0%	50.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	939	100.0%	75.9%	107	11.3%	93.8%	189	20.1%	48.8%	643	68.4%	87.7%	0	0	0
Low Priority	138	100.0%	11.1%	7	5.0%	6.1%	47	34.0%	12.1%	83	60.1%	11.3%	1	0.7%	50.0%
Priority Level Missing	159	100.0%	12.8%	0	0	0	151	94.9%	39.0%	7	4.4%	0.9%	1	0.6%	50.0%

Note: See attached footnotes for variable definitions and descriptions.
VIRc, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 12 - The Great Lakes Health Care System

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	1,307	100.0%	100.0%	147	11.2%	100.0%	362	27.6%	100.0%	796	60.9%	100.0%	2	0.1%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	348	100.0%	26.6%	26	7.4%	17.6%	94	27.0%	25.9%	227	65.2%	28.5%	1	0.2%	50.0%
Urban	948	100.0%	72.5%	118	12.4%	80.2%	267	28.1%	73.7%	562	59.2%	70.6%	1	0.1%	50.0%
Zip Invalid/Missing	11	100.0%	0.8%	3	27.2%	2.0%	1	9.0%	0.2%	7	63.6%	0.8%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	1,227	100.0%	93.8%	142	11.5%	96.5%	343	27.9%	94.7%	740	60.3%	92.9%	2	0.1%	100.0%
> 30 miles	69	100.0%	5.2%	2	2.8%	1.3%	18	26.0%	4.9%	49	71.0%	6.1%	0	0	0
Zip Invalid/Missing	11	100.0%	0.8%	3	27.2%	2.0%	1	9.0%	0.2%	7	63.6%	0.8%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	927	100.0%	70.9%	123	13.2%	83.6%	264	28.4%	72.9%	539	58.1%	67.7%	1	0.1%	50.0%
> 30 miles	369	100.0%	28.2%	21	5.6%	14.2%	97	26.2%	26.7%	250	67.7%	31.4%	1	0.2%	50.0%
Zip Invalid/Missing	11	100.0%	0.8%	3	27.2%	2.0%	1	9.0%	0.2%	7	63.6%	0.8%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	138	100.0%	10.5%	27	19.5%	18.3%	25	18.1%	6.9%	85	61.5%	10.6%	1	0.7%	50.0%
50-64 years	295	100.0%	22.5%	33	11.1%	22.4%	76	25.7%	20.9%	186	63.0%	23.3%	0	0	0
≥ 65 years	874	100.0%	66.8%	87	9.9%	59.1%	261	29.8%	72.0%	525	60.0%	65.9%	1	0.1%	50.0%
GENDER ¹⁶															
Female	30	100.0%	2.2%	1	3.3%	0.6%	18	60.0%	4.9%	10	33.3%	1.2%	1	3.3%	50.0%
Male	1,277	100.0%	97.7%	146	11.4%	99.3%	344	26.9%	95.0%	786	61.5%	98.7%	1	0.0%	50.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	1,009	100.0%	77.1%	135	13.3%	91.8%	178	17.6%	49.1%	695	68.8%	87.3%	1	0.0%	50.0%
Low Priority	185	100.0%	14.1%	12	6.4%	8.1%	77	41.6%	21.2%	96	51.8%	12.0%	0	0	0
Priority Level Missing	113	100.0%	8.6%	0	0	0	107	94.6%	29.5%	5	4.4%	0.6%	1	0.8%	50.0%

Note: See attached footnotes for variable definitions and descriptions.
VIRc, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 13 - VA Upper Midwest Health Care Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	600	100.0%	100.0%	52	8.6%	100.0%	161	26.8%	100.0%	386	64.3%	100.0%	1	0.1%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	353	100.0%	58.8%	24	6.7%	46.1%	97	27.4%	60.2%	231	65.4%	59.8%	1	0.2%	100.0%
Urban	218	100.0%	36.3%	24	11.0%	46.1%	63	28.8%	39.1%	131	60.0%	33.9%	0	0	0
Zip Invalid/Missing	29	100.0%	4.8%	4	13.7%	7.6%	1	3.4%	0.6%	24	82.7%	6.2%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	376	100.0%	62.6%	38	10.1%	73.0%	104	27.6%	64.5%	234	62.2%	60.6%	0	0	0
> 30 miles	195	100.0%	32.5%	10	5.1%	19.2%	56	28.7%	34.7%	128	65.6%	33.1%	1	0.5%	100.0%
Zip Invalid/Missing	29	100.0%	4.8%	4	13.7%	7.6%	1	3.4%	0.6%	24	82.7%	6.2%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	233	100.0%	38.8%	33	14.1%	63.4%	56	24.0%	34.7%	144	61.8%	37.3%	0	0	0
> 30 miles	338	100.0%	56.3%	15	4.4%	28.8%	104	30.7%	64.5%	218	64.4%	56.4%	1	0.2%	100.0%
Zip Invalid/Missing	29	100.0%	4.8%	4	13.7%	7.6%	1	3.4%	0.6%	24	82.7%	6.2%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	36	100.0%	6.0%	6	16.6%	11.5%	6	16.6%	3.7%	24	66.6%	6.2%	0	0	0
50-64 years	146	100.0%	24.3%	18	12.3%	34.6%	35	23.9%	21.7%	93	63.6%	24.0%	0	0	0
≥ 65 years	418	100.0%	69.6%	28	6.6%	53.8%	120	28.7%	74.5%	269	64.3%	69.6%	1	0.2%	100.0%
GENDER ¹⁶															
Female	23	100.0%	3.8%	1	4.3%	1.9%	11	47.8%	6.8%	10	43.4%	2.5%	1	4.3%	100.0%
Male	577	100.0%	96.1%	51	8.8%	98.0%	150	25.9%	93.1%	376	65.1%	97.4%	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	447	100.0%	74.5%	50	11.1%	96.1%	75	16.7%	46.5%	322	72.0%	83.4%	0	0	0
Low Priority	97	100.0%	16.1%	2	2.0%	3.8%	38	39.1%	23.6%	57	58.7%	14.7%	0	0	0
Priority Level Missing	56	100.0%	9.3%	0	0	0	48	85.7%	29.8%	7	12.5%	1.8%	1	1.7%	100.0%

Note: See attached footnotes for variable definitions and descriptions.
VIRc, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 14 - Central Plains Health Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	480	100.0%	100.0%	40	8.3%	100.0%	139	28.9%	100.0%	301	62.7%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	294	100.0%	61.2%	17	5.7%	42.5%	85	28.9%	61.1%	192	65.3%	63.7%
Urban	175	100.0%	36.4%	20	11.4%	50.0%	54	30.8%	38.8%	101	57.7%	33.5%
Zip Invalid/Missing	11	100.0%	2.2%	3	27.2%	7.5%	0	0	0	8	72.7%	2.6%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	343	100.0%	71.4%	29	8.4%	72.5%	101	29.4%	72.6%	213	62.0%	70.7%
> 30 miles	126	100.0%	26.2%	8	6.3%	20.0%	38	30.1%	27.3%	80	63.4%	26.5%
Zip Invalid/Missing	11	100.0%	2.2%	3	27.2%	7.5%	0	0	0	8	72.7%	2.6%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	136	100.0%	28.3%	19	13.9%	47.5%	39	28.6%	28.0%	78	57.3%	25.9%
> 30 miles	333	100.0%	69.3%	18	5.4%	45.0%	100	30.0%	71.9%	215	64.5%	71.4%
Zip Invalid/Missing	11	100.0%	2.2%	3	27.2%	7.5%	0	0	0	8	72.7%	2.6%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	40	100.0%	8.3%	6	15.0%	15.0%	9	22.5%	6.4%	25	62.5%	8.3%
50-64 years	106	100.0%	22.0%	15	14.1%	37.5%	27	25.4%	19.4%	64	60.3%	21.2%
≥ 65 years	334	100.0%	69.5%	19	5.6%	47.5%	103	30.8%	74.1%	212	63.4%	70.4%
GENDER ¹⁶												
Female	19	100.0%	3.9%	2	10.5%	5.0%	10	52.6%	7.1%	7	36.8%	2.3%
Male	461	100.0%	96.0%	38	8.2%	95.0%	129	27.9%	92.8%	294	63.7%	97.6%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	321	100.0%	66.8%	39	12.1%	97.5%	43	13.3%	30.9%	239	74.4%	79.4%
Low Priority	105	100.0%	21.8%	1	0.9%	2.5%	46	43.8%	33.0%	58	55.2%	19.2%
Priority Level Missing	54	100.0%	11.2%	0	0	0	50	92.5%	35.9%	4	7.4%	1.3%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 15 - VA Heartland Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	996	100.0%	100.0%	93	9.3%	100.0%	274	27.5%	100.0%	629	63.1%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	564	100.0%	56.6%	37	6.5%	39.7%	150	26.5%	54.7%	377	66.8%	59.9%
Urban	407	100.0%	40.8%	51	12.5%	54.8%	121	29.7%	44.1%	235	57.7%	37.3%
Zip Invalid/Missing	25	100.0%	2.5%	5	20.0%	5.3%	3	12.0%	1.0%	17	68.0%	2.7%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	764	100.0%	76.7%	75	9.8%	80.6%	201	26.3%	73.3%	488	63.8%	77.5%
> 30 miles	207	100.0%	20.7%	13	6.2%	13.9%	70	33.8%	25.5%	124	59.9%	19.7%
Zip Invalid/Missing	25	100.0%	2.5%	5	20.0%	5.3%	3	12.0%	1.0%	17	68.0%	2.7%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	489	100.0%	49.0%	58	11.8%	62.3%	143	29.2%	52.1%	288	58.8%	45.7%
> 30 miles	482	100.0%	48.3%	30	6.2%	32.2%	128	26.5%	46.7%	324	67.2%	51.5%
Zip Invalid/Missing	25	100.0%	2.5%	5	20.0%	5.3%	3	12.0%	1.0%	17	68.0%	2.7%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	104	100.0%	10.4%	19	18.2%	20.4%	29	27.8%	10.5%	56	53.8%	8.9%
50-64 years	260	100.0%	26.1%	37	14.2%	39.7%	65	25.0%	23.7%	158	60.7%	25.1%
≥ 65 years	632	100.0%	63.4%	37	5.8%	39.7%	180	28.4%	65.6%	415	65.6%	65.9%
GENDER ¹⁶												
Female	14	100.0%	1.4%	2	14.2%	2.1%	7	50.0%	2.5%	5	35.7%	0.7%
Male	982	100.0%	98.5%	91	9.2%	97.8%	267	27.1%	97.4%	624	63.5%	99.2%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	767	100.0%	77.0%	87	11.3%	93.5%	127	16.5%	46.3%	553	72.0%	87.9%
Low Priority	123	100.0%	12.3%	5	4.0%	5.3%	47	38.2%	17.1%	71	57.7%	11.2%
Priority Level Missing	106	100.0%	10.6%	1	0.9%	1.0%	100	94.3%	36.4%	5	4.7%	0.7%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 16 - South Central VA Healthcare Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	2,204	100.0%	100.0%	169	7.6%	100.0%	623	28.2%	100.0%	1,412	64.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	1,129	100.0%	51.2%	72	6.3%	42.6%	312	27.6%	50.0%	745	65.9%	52.7%
Urban	1,012	100.0%	45.9%	85	8.3%	50.2%	309	30.5%	49.5%	618	61.0%	43.7%
Zip Invalid/Missing	63	100.0%	2.8%	12	19.0%	7.1%	2	3.1%	0.3%	49	77.7%	3.4%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	1,478	100.0%	67.0%	117	7.9%	69.2%	417	28.2%	66.9%	944	63.8%	66.8%
> 30 miles	663	100.0%	30.0%	40	6.0%	23.6%	204	30.7%	32.7%	419	63.1%	29.6%
Zip Invalid/Missing	63	100.0%	2.8%	12	19.0%	7.1%	2	3.1%	0.3%	49	77.7%	3.4%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	812	100.0%	36.8%	92	11.3%	54.4%	212	26.1%	34.0%	508	62.5%	35.9%
> 30 miles	1,329	100.0%	60.2%	65	4.8%	38.4%	409	30.7%	65.6%	855	64.3%	60.5%
Zip Invalid/Missing	63	100.0%	2.8%	12	19.0%	7.1%	2	3.1%	0.3%	49	77.7%	3.4%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	271	100.0%	12.2%	34	12.5%	20.1%	61	22.5%	9.7%	176	64.9%	12.4%
50-64 years	648	100.0%	29.4%	52	8.0%	30.7%	158	24.3%	25.3%	438	67.5%	31.0%
≥ 65 years	1,285	100.0%	58.3%	83	6.4%	49.1%	404	31.4%	64.8%	798	62.1%	56.5%
GENDER ¹⁶												
Female	31	100.0%	1.4%	3	9.6%	1.7%	19	61.2%	3.0%	9	29.0%	0.6%
Male	2,173	100.0%	98.5%	166	7.6%	98.2%	604	27.7%	96.9%	1,403	64.5%	99.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	1,803	100.0%	81.8%	164	9.0%	97.0%	325	18.0%	52.1%	1,314	72.8%	93.0%
Low Priority	163	100.0%	7.3%	5	3.0%	2.9%	70	42.9%	11.2%	88	53.9%	6.2%
Priority Level Missing	238	100.0%	10.7%	0	0	0	228	95.7%	36.5%	10	4.2%	0.7%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 17 - VA Heart of Texas Health Care Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	965	100.0%	100.0%	84	8.7%	100.0%	318	32.9%	100.0%	563	58.3%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	328	100.0%	33.9%	19	5.7%	22.6%	115	35.0%	36.1%	194	59.1%	34.4%
Urban	606	100.0%	62.7%	60	9.9%	71.4%	203	33.4%	63.8%	343	56.6%	60.9%
Zip Invalid/Missing	31	100.0%	3.2%	5	16.1%	5.9%	0	0	0	26	83.8%	4.6%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	871	100.0%	90.2%	75	8.6%	89.2%	293	33.6%	92.1%	503	57.7%	89.3%
> 30 miles	63	100.0%	6.5%	4	6.3%	4.7%	25	39.6%	7.8%	34	53.9%	6.0%
Zip Invalid/Missing	31	100.0%	3.2%	5	16.1%	5.9%	0	0	0	26	83.8%	4.6%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	508	100.0%	52.6%	66	12.9%	78.5%	174	34.2%	54.7%	268	52.7%	47.6%
> 30 miles	426	100.0%	44.1%	13	3.0%	15.4%	144	33.8%	45.2%	269	63.1%	47.7%
Zip Invalid/Missing	31	100.0%	3.2%	5	16.1%	5.9%	0	0	0	26	83.8%	4.6%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	128	100.0%	13.2%	24	18.7%	28.5%	44	34.3%	13.8%	60	46.8%	10.6%
50-64 years	288	100.0%	29.8%	28	9.7%	33.3%	89	30.9%	27.9%	171	59.3%	30.3%
≥ 65 years	549	100.0%	56.8%	32	5.8%	38.0%	185	33.6%	58.1%	332	60.4%	58.9%
GENDER ¹⁶												
Female	37	100.0%	3.8%	3	8.1%	3.5%	19	51.3%	5.9%	15	40.5%	2.6%
Male	928	100.0%	96.1%	81	8.7%	96.4%	299	32.2%	94.0%	548	59.0%	97.3%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	746	100.0%	77.3%	79	10.5%	94.0%	160	21.4%	50.3%	507	67.9%	90.0%
Low Priority	70	100.0%	7.2%	3	4.2%	3.5%	32	45.7%	10.0%	35	50.0%	6.2%
Priority Level Missing	149	100.0%	15.4%	2	1.3%	2.3%	126	84.5%	39.6%	21	14.0%	3.7%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 18 - VA Southwest Health Care Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	953	100.0%	100.0%	112	11.7%	100.0%	217	22.7%	100.0%	623	65.3%	100.0%	1	0.1%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	425	100.0%	44.5%	38	8.9%	33.9%	95	22.3%	43.7%	292	68.7%	46.8%	0	0	0
Urban	478	100.0%	50.1%	64	13.3%	57.1%	120	25.1%	55.2%	293	61.2%	47.0%	1	0.2%	100.0%
Zip Invalid/Missing	50	100.0%	5.2%	10	20.0%	8.9%	2	4.0%	0.9%	38	76.0%	6.0%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	703	100.0%	73.7%	82	11.6%	73.2%	172	24.4%	79.2%	448	63.7%	71.9%	1	0.1%	100.0%
> 30 miles	200	100.0%	20.9%	20	10.0%	17.8%	43	21.5%	19.8%	137	68.5%	21.9%	0	0	0
Zip Invalid/Missing	50	100.0%	5.2%	10	20.0%	8.9%	2	4.0%	0.9%	38	76.0%	6.0%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	377	100.0%	39.5%	59	15.6%	52.6%	98	25.9%	45.1%	219	58.0%	35.1%	1	0.2%	100.0%
> 30 miles	526	100.0%	55.1%	43	8.1%	38.3%	117	22.2%	53.9%	366	69.5%	58.7%	0	0	0
Zip Invalid/Missing	50	100.0%	5.2%	10	20.0%	8.9%	2	4.0%	0.9%	38	76.0%	6.0%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	93	100.0%	9.7%	16	17.2%	14.2%	16	17.2%	7.3%	61	65.5%	9.7%	0	0	0
50-64 years	266	100.0%	27.9%	39	14.6%	34.8%	52	19.5%	23.9%	175	65.7%	28.0%	0	0	0
≥ 65 years	594	100.0%	62.3%	57	9.5%	50.8%	149	25.0%	68.6%	387	65.1%	62.1%	1	0.1%	100.0%
GENDER ¹⁶															
Female	30	100.0%	3.1%	4	13.3%	3.5%	14	46.6%	6.4%	11	36.6%	1.7%	1	3.3%	100.0%
Male	923	100.0%	96.8%	108	11.7%	96.4%	203	21.9%	93.5%	612	66.3%	98.2%	0	0	0
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	754	100.0%	79.1%	106	14.0%	94.6%	104	13.7%	47.9%	544	72.1%	87.3%	0	0	0
Low Priority	106	100.0%	11.1%	4	3.7%	3.5%	38	35.8%	17.5%	64	60.3%	10.2%	0	0	0
Priority Level Missing	93	100.0%	9.7%	2	2.1%	1.7%	75	80.6%	34.5%	15	16.1%	2.4%	1	1.0%	100.0%

Note: See attached footnotes for variable definitions and descriptions.
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Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 19 - Rocky Mountain Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	515	100.0%	100.0%	71	13.7%	100.0%	127	24.6%	100.0%	317	61.5%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	222	100.0%	43.1%	16	7.2%	22.5%	72	32.4%	56.6%	134	60.3%	42.2%
Urban	260	100.0%	50.4%	44	16.9%	61.9%	55	21.1%	43.3%	161	61.9%	50.7%
Zip Invalid/Missing	33	100.0%	6.4%	11	33.3%	15.4%	0	0	0	22	66.6%	6.9%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	374	100.0%	72.6%	56	14.9%	78.8%	85	22.7%	66.9%	233	62.2%	73.5%
> 30 miles	108	100.0%	20.9%	4	3.7%	5.6%	42	38.8%	33.0%	62	57.4%	19.5%
Zip Invalid/Missing	33	100.0%	6.4%	11	33.3%	15.4%	0	0	0	22	66.6%	6.9%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	174	100.0%	33.7%	43	24.7%	60.5%	28	16.0%	22.0%	103	59.1%	32.4%
> 30 miles	308	100.0%	59.8%	17	5.5%	23.9%	99	32.1%	77.9%	192	62.3%	60.5%
Zip Invalid/Missing	33	100.0%	6.4%	11	33.3%	15.4%	0	0	0	22	66.6%	6.9%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	46	100.0%	8.9%	9	19.5%	12.6%	6	13.0%	4.7%	31	67.3%	9.7%
50-64 years	140	100.0%	27.1%	30	21.4%	42.2%	19	13.5%	14.9%	91	65.0%	28.7%
≥ 65 years	329	100.0%	63.8%	32	9.7%	45.0%	102	31.0%	80.3%	195	59.2%	61.5%
GENDER ¹⁶												
Female	7	100.0%	1.3%	2	28.5%	2.8%	2	28.5%	1.5%	3	42.8%	0.9%
Male	508	100.0%	98.6%	69	13.5%	97.1%	125	24.6%	98.4%	314	61.8%	99.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	408	100.0%	79.2%	68	16.6%	95.7%	66	16.1%	51.9%	274	67.1%	86.4%
Low Priority	69	100.0%	13.3%	3	4.3%	4.2%	27	39.1%	21.2%	39	56.5%	12.3%
Priority Level Missing	38	100.0%	7.3%	0	0	0	34	89.4%	26.7%	4	10.5%	1.2%

Note: See attached footnotes for variable definitions and descriptions.
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Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 20 - Northwest Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	717	100.0%	100.0%	68	9.4%	100.0%	223	31.1%	100.0%	426	59.4%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	358	100.0%	49.9%	26	7.2%	38.2%	105	29.3%	47.0%	227	63.4%	53.2%
Urban	354	100.0%	49.3%	42	11.8%	61.7%	118	33.3%	52.9%	194	54.8%	45.5%
Zip Invalid/Missing	5	100.0%	0.6%	0	0	0	0	0	0	5	100.0%	1.1%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	538	100.0%	75.0%	54	10.0%	79.4%	170	31.5%	76.2%	314	58.3%	73.7%
> 30 miles	174	100.0%	24.2%	14	8.0%	20.5%	53	30.4%	23.7%	107	61.4%	25.1%
Zip Invalid/Missing	5	100.0%	0.6%	0	0	0	0	0	0	5	100.0%	1.1%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	372	100.0%	51.8%	49	13.1%	72.0%	112	30.1%	50.2%	211	56.7%	49.5%
> 30 miles	340	100.0%	47.4%	19	5.5%	27.9%	111	32.6%	49.7%	210	61.7%	49.2%
Zip Invalid/Missing	5	100.0%	0.6%	0	0	0	0	0	0	5	100.0%	1.1%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	110	100.0%	15.3%	16	14.5%	23.5%	44	40.0%	19.7%	50	45.4%	11.7%
50-64 years	218	100.0%	30.4%	32	14.6%	47.0%	61	27.9%	27.3%	125	57.3%	29.3%
≥ 65 years	389	100.0%	54.2%	20	5.1%	29.4%	118	30.3%	52.9%	251	64.5%	58.9%
GENDER ¹⁶												
Female	29	100.0%	4.0%	3	10.3%	4.4%	13	44.8%	5.8%	13	44.8%	3.0%
Male	688	100.0%	95.9%	65	9.4%	95.5%	210	30.5%	94.1%	413	60.0%	96.9%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	546	100.0%	76.1%	64	11.7%	94.1%	99	18.1%	44.3%	383	70.1%	89.9%
Low Priority	67	100.0%	9.3%	2	2.9%	2.9%	34	50.7%	15.2%	31	46.2%	7.2%
Priority Level Missing	104	100.0%	14.5%	2	1.9%	2.9%	90	86.5%	40.3%	12	11.5%	2.8%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 21 - Sierra Pacific Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE											
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	861	100.0%	100.0%	108	12.5%	100.0%	230	26.7%	100.0%	522	60.6%	100.0%	1	0.1%	100.0%
TYPE OF ZIP CODE ¹³															
Rural	217	100.0%	25.2%	13	5.9%	12.0%	70	32.2%	30.4%	134	61.7%	25.6%	0	0	0
Urban	618	100.0%	71.7%	92	14.8%	85.1%	158	25.5%	68.6%	367	59.3%	70.3%	1	0.1%	100.0%
Zip Invalid/Missing	26	100.0%	3.0%	3	11.5%	2.7%	2	7.6%	0.8%	21	80.7%	4.0%	0	0	0
OUTPATIENT DISTANCE ¹⁴															
≤ 30 miles	786	100.0%	91.2%	103	13.1%	95.3%	209	26.5%	90.8%	473	60.1%	90.6%	1	0.1%	100.0%
> 30 miles	49	100.0%	5.6%	2	4.0%	1.8%	19	38.7%	8.2%	28	57.1%	5.3%	0	0	0
Zip Invalid/Missing	26	100.0%	3.0%	3	11.5%	2.7%	2	7.6%	0.8%	21	80.7%	4.0%	0	0	0
INPATIENT DISTANCE ¹⁴															
≤ 30 miles	527	100.0%	61.2%	88	16.6%	81.4%	117	22.2%	50.8%	321	60.9%	61.4%	1	0.1%	100.0%
> 30 miles	308	100.0%	35.7%	17	5.5%	15.7%	111	36.0%	48.2%	180	58.4%	34.4%	0	0	0
Zip Invalid/Missing	26	100.0%	3.0%	3	11.5%	2.7%	2	7.6%	0.8%	21	80.7%	4.0%	0	0	0
AGE AS OF 01/01/1999 ¹⁵															
< 50 years	89	100.0%	10.3%	17	19.1%	15.7%	15	16.8%	6.5%	57	64.0%	10.9%	0	0	0
50-64 years	252	100.0%	29.2%	45	17.8%	41.6%	46	18.2%	20.0%	161	63.8%	30.8%	0	0	0
≥ 65 years	520	100.0%	60.3%	46	8.8%	42.5%	169	32.5%	73.4%	304	58.4%	58.2%	1	0.1%	100.0%
GENDER ¹⁶															
Female	32	100.0%	3.7%	5	15.6%	4.6%	13	40.6%	5.6%	14	43.7%	2.6%	0	0	0
Male	829	100.0%	96.2%	103	12.4%	95.3%	217	26.1%	94.3%	508	61.2%	97.3%	1	0.1%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷															
High Priority	655	100.0%	76.0%	105	16.0%	97.2%	79	12.0%	34.3%	470	71.7%	90.0%	1	0.1%	100.0%
Low Priority	89	100.0%	10.3%	3	3.3%	2.7%	43	48.3%	18.6%	43	48.3%	8.2%	0	0	0
Priority Level Missing	117	100.0%	13.5%	0	0	0	108	92.3%	46.9%	9	7.6%	1.7%	0	0	0

Note: See attached footnotes for variable definitions and descriptions.
VIRc, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: 22 - Desert Pacific Healthcare Network

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only VA services ⁸			Used only Medicare services ⁹			Used both services ¹⁰		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	947	100.0%	100.0%	162	17.1%	100.0%	273	28.8%	100.0%	512	54.0%	100.0%
TYPE OF ZIP CODE ¹³												
Rural	93	100.0%	9.8%	10	10.7%	6.1%	34	36.5%	12.4%	49	52.6%	9.5%
Urban	828	100.0%	87.4%	144	17.3%	88.8%	239	28.8%	87.5%	445	53.7%	86.9%
Zip Invalid/Missing	26	100.0%	2.7%	8	30.7%	4.9%	0	0	0	18	69.2%	3.5%
OUTPATIENT DISTANCE ¹⁴												
≤ 30 miles	899	100.0%	94.9%	152	16.9%	93.8%	264	29.3%	96.7%	483	53.7%	94.3%
> 30 miles	22	100.0%	2.3%	2	9.0%	1.2%	9	40.9%	3.2%	11	50.0%	2.1%
Zip Invalid/Missing	26	100.0%	2.7%	8	30.7%	4.9%	0	0	0	18	69.2%	3.5%
INPATIENT DISTANCE ¹⁴												
≤ 30 miles	788	100.0%	83.2%	145	18.4%	89.5%	219	27.7%	80.2%	424	53.8%	82.8%
> 30 miles	133	100.0%	14.0%	9	6.7%	5.5%	54	40.6%	19.7%	70	52.6%	13.6%
Zip Invalid/Missing	26	100.0%	2.7%	8	30.7%	4.9%	0	0	0	18	69.2%	3.5%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	139	100.0%	14.6%	28	20.1%	17.2%	36	25.8%	13.1%	75	53.9%	14.6%
50-64 years	302	100.0%	31.8%	71	23.5%	43.8%	73	24.1%	26.7%	158	52.3%	30.8%
≥ 65 years	505	100.0%	53.3%	63	12.4%	38.8%	163	32.2%	59.7%	279	55.2%	54.4%
Invalid/Missing Age	1	100.0%	0.1%	0	0	0	1	100.0%	0.3%	0	0	0
GENDER ¹⁶												
Female	21	100.0%	2.2%	3	14.2%	1.8%	9	42.8%	3.2%	9	42.8%	1.7%
Male	926	100.0%	97.7%	159	17.1%	98.1%	264	28.5%	96.7%	503	54.3%	98.2%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	752	100.0%	79.4%	155	20.6%	95.6%	133	17.6%	48.7%	464	61.7%	90.6%
Low Priority	90	100.0%	9.5%	5	5.5%	3.0%	42	46.6%	15.3%	43	47.7%	8.3%
Priority Level Missing	105	100.0%	11.0%	2	1.9%	1.2%	98	93.3%	35.8%	5	4.7%	0.9%

Note: See attached footnotes for variable definitions and descriptions.
VIRcC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

VHA VISN ¹²: No VISN data available

End Stage Renal Disease Cohort	Medicare Enrolled Veterans (FFS only) ⁷			TYPE OF HEALTHCARE USE								
				Used only Medicare services ⁹			Used both services ¹⁰			Used neither service ¹¹		
	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %	Number of Veterans	Row %	Col %
*** TOTAL VETERANS ***	118	100.0%	100.0%	114	96.6%	100.0%	3	2.5%	100.0%	1	0.8%	100.0%
TYPE OF ZIP CODE ¹³												
Zip Invalid/Missing	118	100.0%	100.0%	114	96.6%	100.0%	3	2.5%	100.0%	1	0.8%	100.0%
OUTPATIENT DISTANCE ¹⁴												
Zip Invalid/Missing	118	100.0%	100.0%	114	96.6%	100.0%	3	2.5%	100.0%	1	0.8%	100.0%
INPATIENT DISTANCE ¹⁴												
Zip Invalid/Missing	118	100.0%	100.0%	114	96.6%	100.0%	3	2.5%	100.0%	1	0.8%	100.0%
AGE AS OF 01/01/1999 ¹⁵												
< 50 years	9	100.0%	7.6%	9	100.0%	7.8%	0	0	0	0	0	0
50-64 years	29	100.0%	24.5%	27	93.1%	23.6%	2	6.8%	66.6%	0	0	0
≥ 65 years	80	100.0%	67.7%	78	97.5%	68.4%	1	1.2%	33.3%	1	1.2%	100.0%
GENDER ¹⁶												
Female	2	100.0%	1.6%	2	100.0%	1.7%	0	0	0	0	0	0
Male	116	100.0%	98.3%	112	96.5%	98.2%	3	2.5%	100.0%	1	0.8%	100.0%
CONSTRUCTED PRIORITY LEVEL ¹⁷												
High Priority	9	100.0%	7.6%	7	77.7%	6.1%	2	22.2%	66.6%	0	0	0
Priority Level Missing	109	100.0%	92.3%	107	98.1%	93.8%	1	0.9%	33.3%	1	0.9%	100.0%

Note: See attached footnotes for variable definitions and descriptions.
VIReC, Hynes

Table 8 – Healthcare Utilization Among Medicare-Enrolled Veterans (FFS only) with End Stage Renal Disease

Variable Definitions and Descriptions

7. Medicare Enrolled Veterans (FFS only) in End State Renal Disease Cohort: Included veterans who met at least one of the following criteria from fiscal year 1997 through 2000: used VHA services, enrolled in the VHA health system, or received compensation or pension benefits from the VA. The file draws from several data sources:

- Office of Policy and Planning (OPP) Enrollment File as of December 1999,
- VISN Support Service Center (VSSC) Unique User File for October 1997-September 2000,
- Veterans Benefits Administration (VBA) Compensation and Pension Non-Users File, and
- The Allocation Resource Center (ARC) Pharmacy Only Users File from October 1997-September 1999.

Demographic information for each veteran, used for comparing to the Medicare demographic data during the match process, was also obtained from these sources.

This column included the veterans in the CMS Denominator file (eligible for Medicare benefits during CY 1999) whose SSN matched an SSN in the above sampling frame, and who also matched on gender and at least 2 of the 3 parts of the date of birth (month/year, day/year, month/day), and who were alive as of January 1, 1999. These veterans were also not enrolled in a Medicare + Choice plan at any time during 1999 and had a diagnosis of end stage renal disease during 1999 (i.e. whose SSN was found in the United States Renal Disease System).

8. Used only VA services: Had at least one occurrence in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient; and no occurrences in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier.

9. Used only Medicare services: Had at least one occurrence in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier; and no occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

10. Used both services: Had at least one occurrence in any of these CMS claims files: Part A MedPAR, Part A Outpatient, Part B Carrier; and at least one occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

11. Used neither service: Had no occurrence in any of these CMS claims files: Part A MedPAR, Outpatient, Part B Carrier; and no occurrences in any of these VA healthcare use files (Medical SAS datasets): Inpatient Main, Outpatient Visit, Fee Basis Inpatient, Fee Basis Outpatient.

12. VISN: Veteran's Integrated Service Network is based on the zip code of the veteran's residence. See Appendix E, Section I for details.

13. Type of zip code: Urban/Rural designation. See Appendix E, Section I for details.

14. Outpatient and inpatient distance: Distance between veteran's residence zip code and the nearest inpatient and outpatient VA facility. See Appendix E, Section I for details.

15. Age: Veteran's age as of 01/01/1999. See Appendix E, Section II for details.

16. Gender: Sex of the veteran. See Appendix E, Section III for details.

17. Constructed Priority Level: This variable was constructed by VIREC based on three different variables: "Priority Level", "Means Test", and "Service Connected Status". High Priority includes veterans with "Priority Level" 1-6, "Means Test" Category A, or "Service Connected Status" 10-100%. Low Priority includes veterans with "Priority Level" 7 or "Means Test" Category C. See Appendix E, Section IV for details

Figure 1
Method for Merging Calendar Year 1999 VA and Medicare Utilization Data

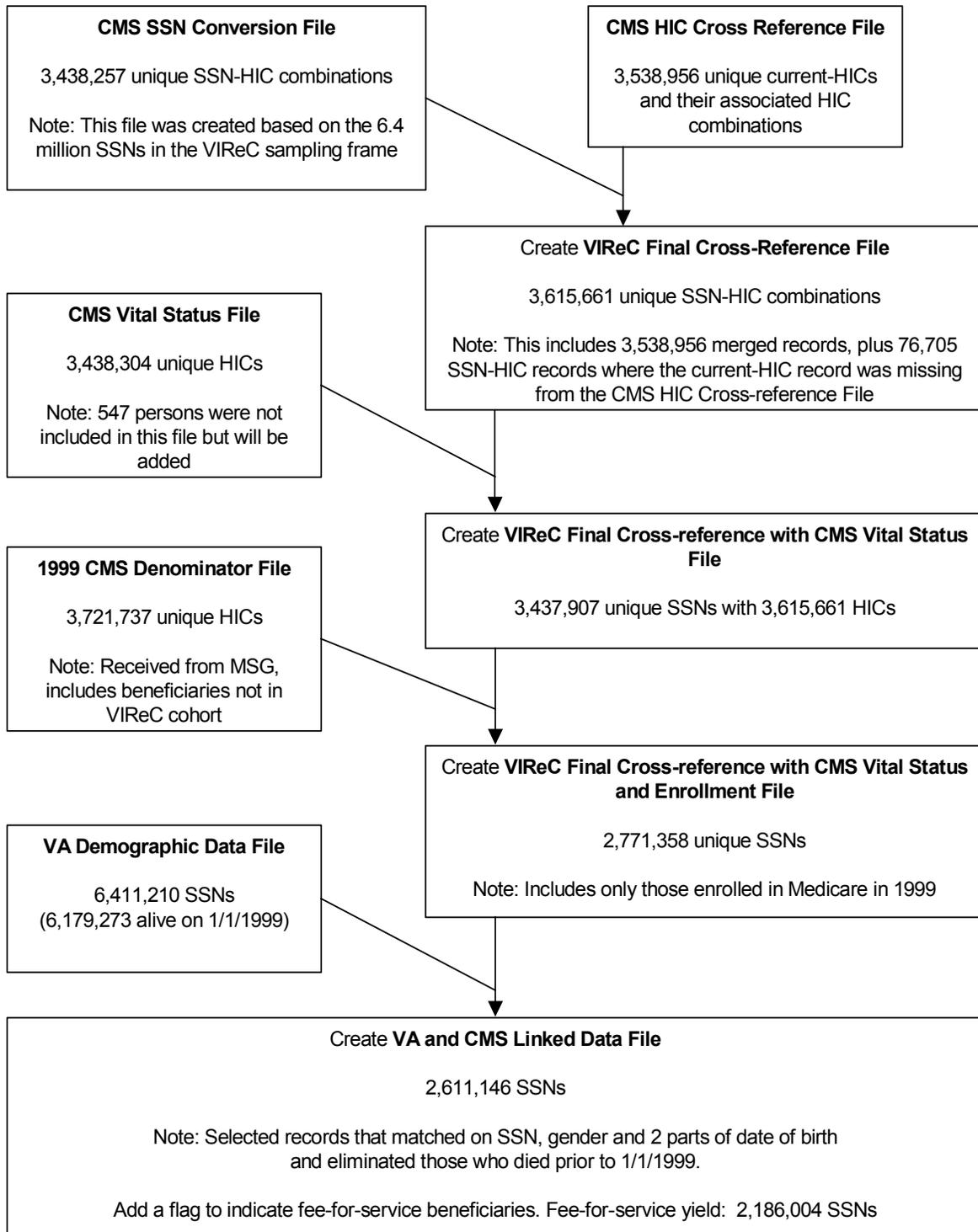
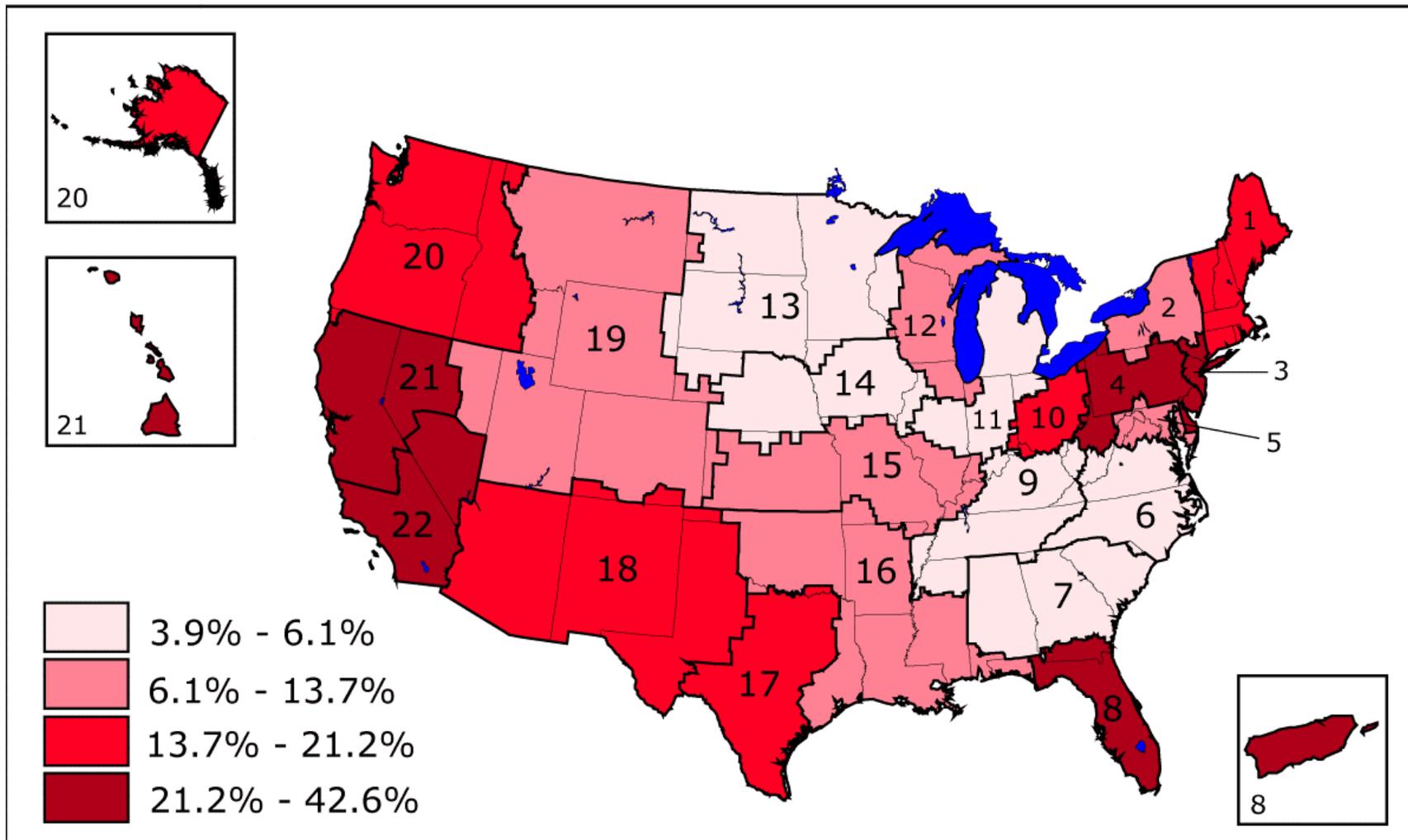
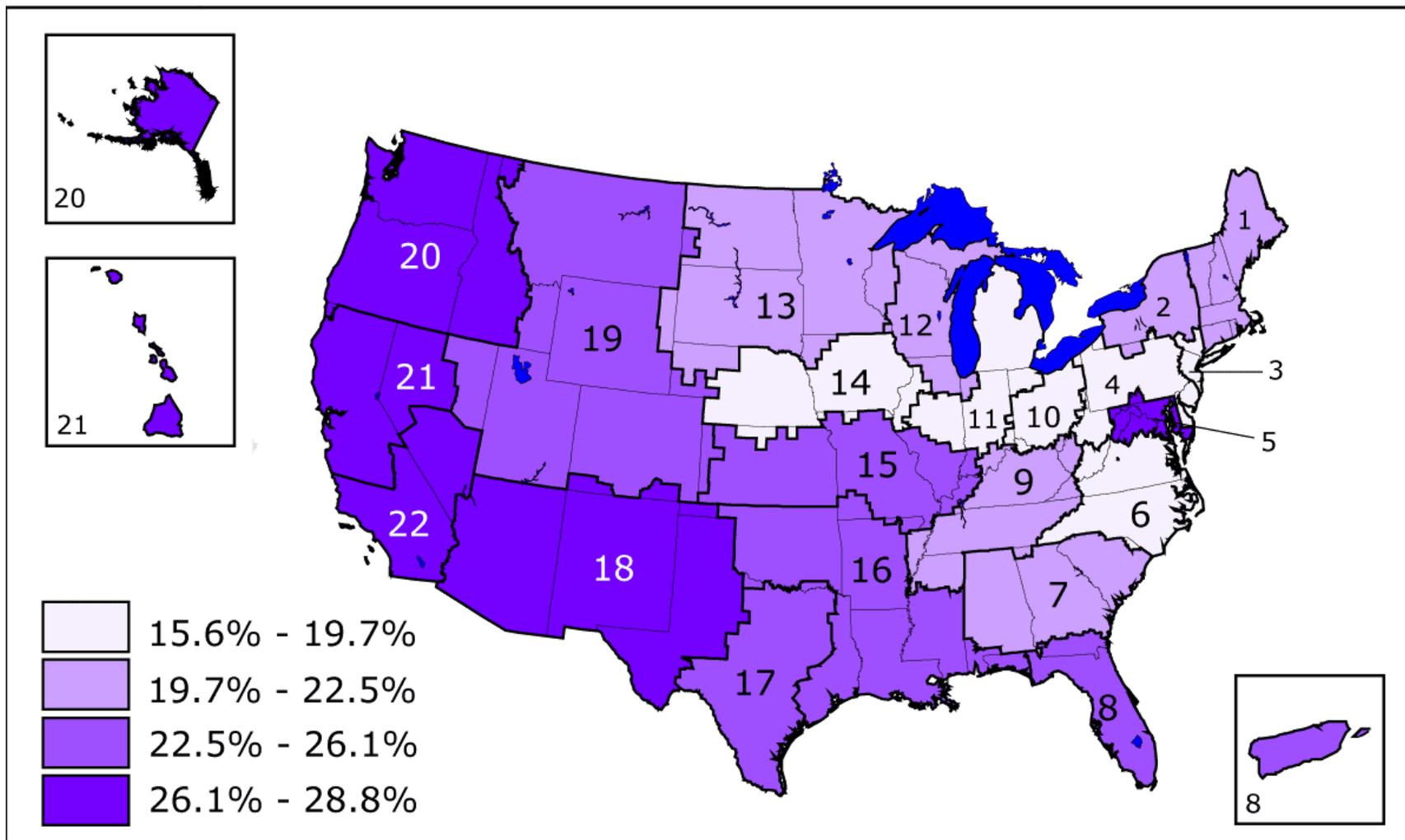


Figure 2
Percent of Medicare-enrolled veterans enrolled in a Medicare+Choice plan at least one month in 1999, by VISN*



*See Appendix F for VISN names

Figure 3
Percent of Medicare-enrolled veterans (FFS only) who used only VA services in 1999, by VISN*



*See Appendix F for VISN names

Figure 4
Percent of Medicare-enrolled veterans (FFS only) who used only Medicare services in 1999, by VISN*

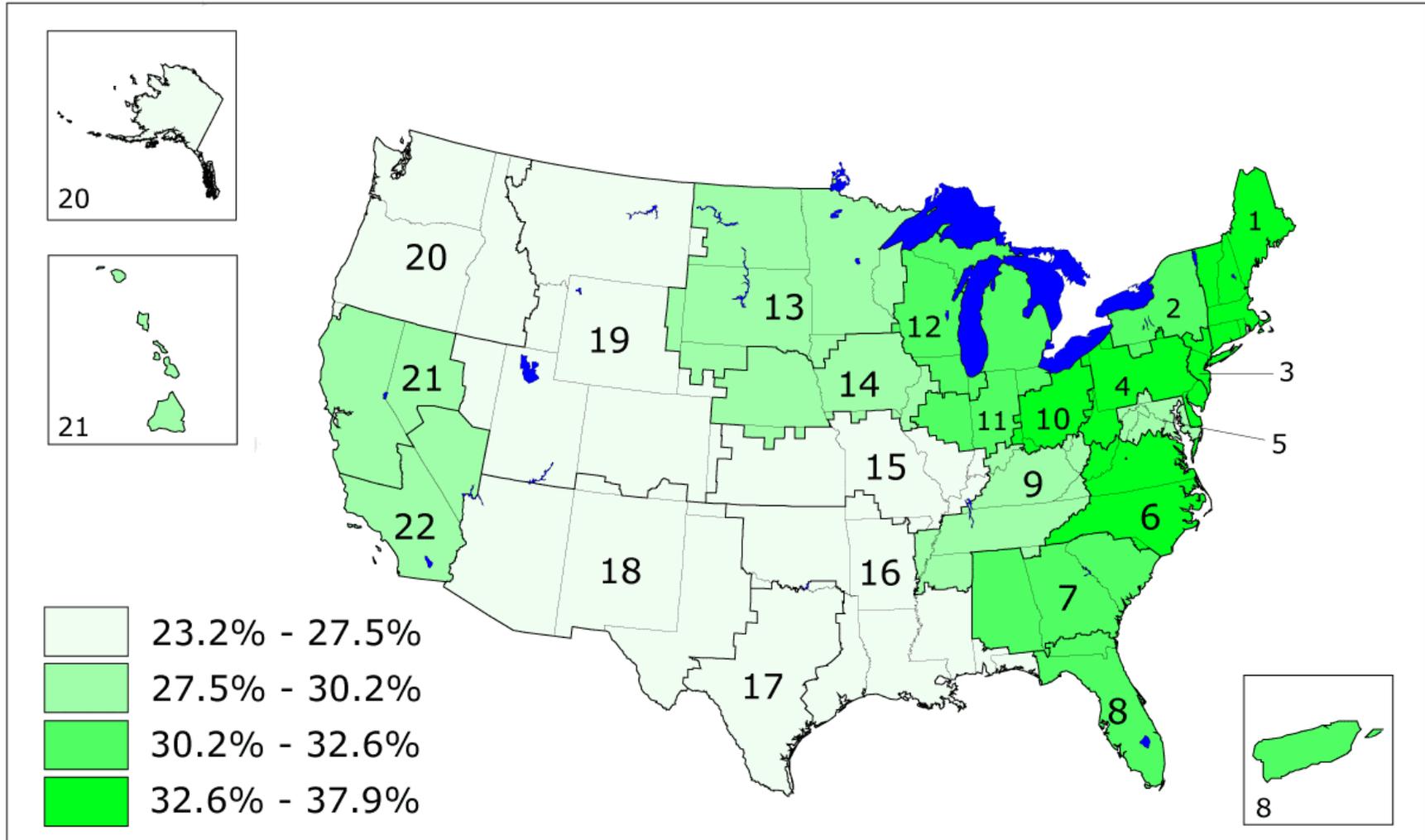
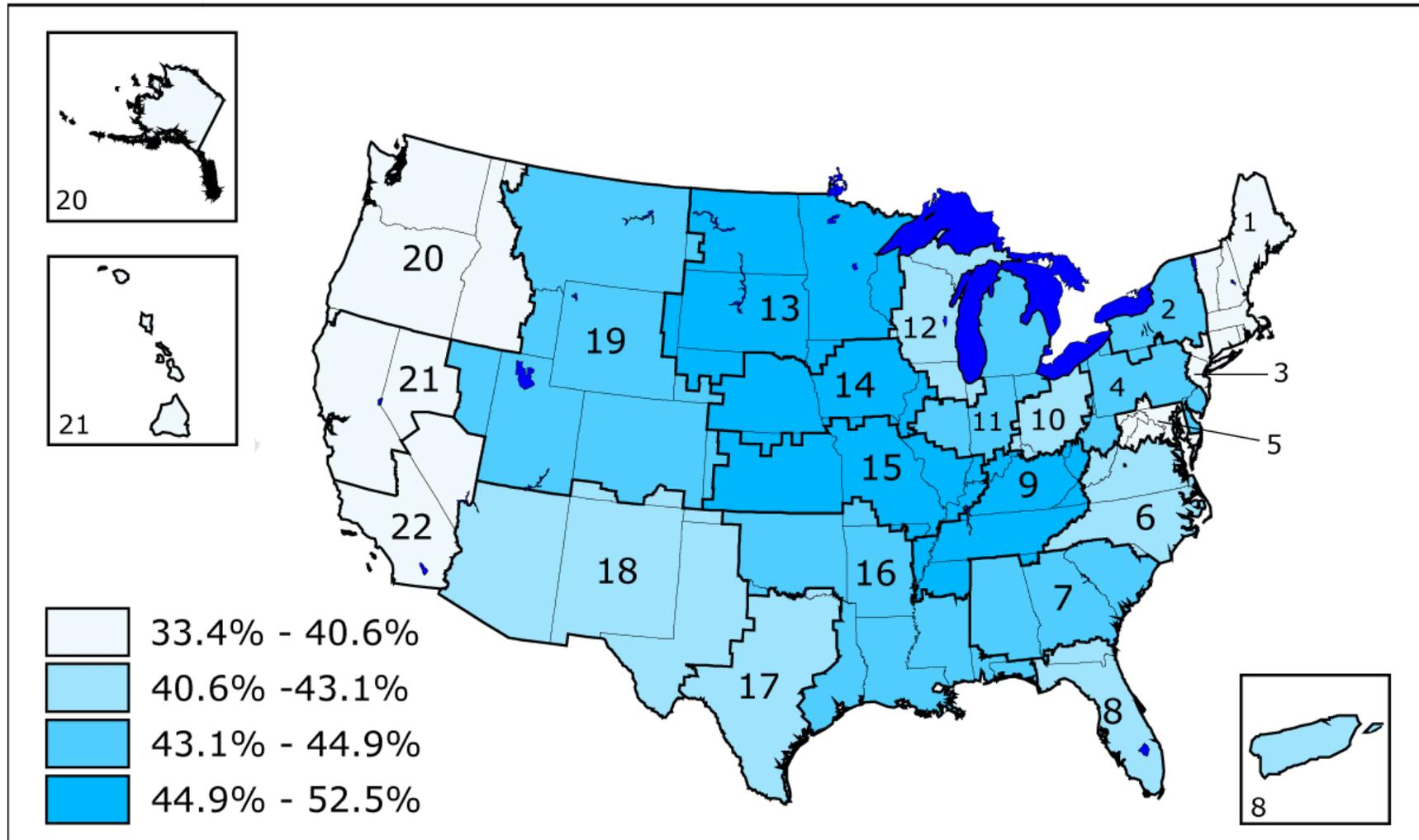


Figure 5
Percent of Medicare-enrolled veterans (FFS only) who used both VA and Medicare services in 1999, by VISN*



Appendices

- Appendix A System of Records for the Consolidated Data Information System
- Appendix B CMS Data Use Agreement for the VIREC analysis of 1999 data
- Appendix C CMS Memorandum of Understanding, July 24, 2002
- Appendix D Data Linkage Processes
- Appendix E Variable Construction and Data Sources
- Appendix F List of Veterans Integrated Service Networks (VISNs)

Appendix A

System of Records for the Consolidated Data Information System

payable under Title II of the Social Security Act.
 On October 24, 2000, for the period beginning December 1, 2000, the Social Security Administration announced at 65 FR 63663 of the **Federal Register**, a 3.5 percent cost-of-living increase in Social Security Benefits under Title II of the Social Security Act. The Veteran Benefits Administration has indicated Pension benefits will be increased by a 3.5 percent cost-of-living increase effective December 1, 2000. Therefore, applying the same percentage and rounding up in accordance with 38 CFR 3.29, the following income limitations for the Means Test Thresholds will be effective January 1, 2001.

TABLE 1.—MEANS TEST THRESHOLDS

(1) Veterans with no dependents:	
(a) Means Test Co-payment Exempted Category	\$23,688
(b) Means Test Co-payment Required Category	23,689
(2) Veterans with 1 dependent:	
(a) Means Test Co-payment Exempt Category	28,429
(b) Means Test Co-payment Required Category	28,430
(3) Veterans with 2 dependents:	
(a) Means Test Co-payment Exempt Category	30,015
(b) Means Test Co-payment Required Category	30,016
(4) Veterans with 3 dependents:	
(a) Means Test Co-payment Exempt Category	31,601
(b) Means Test Co-payment Required Category	31,602
(5) Veterans with 4 dependents:	
(a) Means Test Co-payment Exempt Category	33,187
(b) Means Test Co-payment Required Category	33,188
(6) Veterans with 5 dependents:	
(a) Means Test Co-payment Exempt Category	34,773
(b) Means Test Co-payment Required Category	34,774
(7) Child Income Exclusion is:	7,450
(8) The Medicare deductible is:	792
(9) Maximum annual Rate of Pension effective December 1, 2000 are:	
(a) The base rate is	9,304
(b) The base rate with one dependent is	12,186
(c) Add 1,586 each additional dependent.	

DEPARTMENT OF VETERANS AFFAIRS

Privacy Act of 1974; System of Records

AGENCY: Department of Veterans Affairs.
ACTION: Report of New System of Records—Consolidated Data Information System—VA (97VA105).

SUMMARY: The Privacy Act of 1974 (5 U.S.C. 552(e)(4)) requires that all agencies publish in the **Federal Register** a notice of the existence and character of their system of records. Notice is hereby given that VA is adding a new system of records entitled "Consolidated Data Information System—VA" (97VA105).

DATES: Comments on the establishment of the new system of records must be received no later than February 15, 2001. If no public comment is received during the period allowed for comment or unless otherwise published in the **Federal Register** by VA, the system will become effective February 15, 2001.

ADDRESSES: Comments may be submitted to Director, Office of Regulations Management (02D), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420. Comments will be available for public inspection at the above address in the Office of Regulations Management, Room 1176, between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday, excluding Federal holidays.

FOR FURTHER INFORMATION CONTACT: Veterans Health Administration Privacy Act Officer (193B2), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (727) 320-1839.

SUPPLEMENTARY INFORMATION: Under Section 527 of Title 38, U.S.C., and the Government Performance and Results Act of 1993, Pub. L. 103-62, VA is required to measure and evaluate, on an ongoing basis, the effectiveness of VA benefit programs and services. In performing this required function, VA must collect, collate and analyze full statistical data regarding participation, provision of services, categories of beneficiaries, and planning of expenditures for all VA programs. For this reason, VA is establishing a new system of records, which combines information from several existing systems of records with information from non-VA sources. This combined database is necessary for VA to accurately and timely assess the current health care usage by the patient population served by VA, to forecast

future demand for VA medical care by individuals currently eligible for service by VA medical facilities, and to understand the numerous implications of cross-utilization between VA and non-VA health care systems.

Records from the Patient Medical Record System (24VA136), the Patient Fee Basis Medical and Pharmacy Records (23VA136), Veterans and Beneficiaries Identification and Records Location Subsystem (38VA23), Compensation, Pension, Education and Rehabilitation Records (58VA21/22), and Automated Medication Processing Records (56VA119) will be incorporated into this new system of records. Specific request files will be created for use in submitting requests for veteran-specific data from the Health Care Financing Administration (HCFA), the Department of Defense (DoD), and other non-VA data sources including state Medicaid databases. The new database will be created by including Medicare data records on utilization and enrollment for all VA users, enrollees and special category veterans. Utilization and enrollment data will also be extracted from the DoD military personnel system of records in order to supplement VA's database. This system will not be used by VA to make any determinations as to individual veteran's benefits. Because the exchange of data among VA, HCFA, DoD, and any other non-VA agencies will be only for the purpose of identifying current health care usage and forecasting future health care usage by VA beneficiaries, the computer matching provision of the Privacy Act does not apply.

VA will maintain the system of records in electronic form at VA Management Science Group, Bedford, Massachusetts, and VA Information Resource Center, Hines, Illinois. Copies or parts of these records may be maintained at VA Automation Center, Austin, Texas, and VA Allocation Resource Center, Braintree, Massachusetts. Multiple sites are needed because VA data files will be drawn from multiple locations and merged data files will be very large. Data in the system of records will include names, social security numbers (SSNs), demographic and health services utilization data for all VHA users and special veteran populations; inpatient, outpatient, physician supplier, nursing home, hospice, home care, and durable medical equipment data from HCFA; and utilization and enrollment data from DoD. The new database will be used to produce reports for statistical analyses on, for example: (1) The number of Medicare-eligible users who obtain health care services from VA,

Approved: January 5, 2001.

Hershel W. Gober,

Acting Secretary of Veterans Affairs.

[FR Doc. 01-1180 Filed 1-12-01; 8:45 am]

BILLING CODE 8320-01-P

Medicare, and both VA and Medicare providers (dual use); (2) the number of "dual use" veterans by specific disease categories; and (3) the inpatient, outpatient, and total costs associated with VA services and Medicare covered services by "dual use" veterans. Statistical reports will not contain individually identifiable health information.

We are proposing to establish the following routine use disclosures of information which will be maintained in the system:

1. To Federal, State, and local agencies for the purpose of better identifying the total current health care usage of the patient population by VA, to forecast future demand for VA medical care, and as part of statistical matching programs.

VA needs to obtain information from other agencies in order to collect full statistical data regarding participation and provision of services to the patient population served by VA as well as non-VA health care systems. The records may also be disclosed as part of statistical matching programs to accomplish these purposes.

2. To Federal, State and local government agencies and national health organizations in order to assist in the development of programs that will be beneficial to claimants and to protect their rights under law and assure that they are receiving all benefits to which they are entitled.

VA needs to obtain information from other agencies in order to measure and evaluate, on an ongoing basis, the effectiveness of VA benefit programs and services.

3. To a Federal, State, or local agency charged with the responsibility of investigating or prosecuting civil, criminal or regulatory violations of law, or charged with enforcing or implementing the statute, regulation, rule or order issued pursuant thereto. The names and addresses of veterans may only be disclosed:

- To a Federal agency when it is relevant to a suspected violation or reasonably imminent violation of law; and

- To a State or local agency under a written request when it is relevant to a suspected violation or reasonably imminent violation of law concerning public health or safety.

VA must be able to comply with the requirements of agencies charged with enforcing the law, and investigations of violations or possible violations of law. VA must also be able to provide information to State or local agencies charged with protecting the public health as set forth in State law.

4. To epidemiological and other research facilities approved by the Under Secretary for Health for research purposes (disclosure excludes names and addresses).

VA must be able to disclose information for research purposes approved by the Under Secretary for Health.

5. To a Federal department or agency or to a contractor of a Federal department or agency in order to conduct Federal research necessary to accomplish a statutory purpose of an agency.

VA must be able to disclose information for research purposes needed to accomplish a statutory purpose of a Federal agency.

6. To the National Archives and Record Administration (NARA) in records management inspections conducted under authority of 44 U.S.C. 2904 and 2906.

NARA is responsible for archiving old records no longer actively used, but which may be appropriate for preservation; they are responsible in general for the physical maintenance of the Federal government's records. VA must be able to turn records over to this agency in order to determine the proper disposition of such records.

7. To the Department of Justice or in a proceeding before a court, adjudicative body, or other administrative body before which the Agency is authorized to appear when the Agency, or any component thereof; or any employee of the Agency in his or her official capacity; where the Department of Justice or the Agency has agreed to represent the employee; or the U.S. when the Agency determines that litigation is likely to affect the Agency or any of its components, is a party to litigation, and has an interest in such litigation, and the use of such records by the Department of Justice or the Agency is deemed by the Agency to be relevant and necessary to the litigation provided, however, that the disclosure is compatible with the purpose for which the records were collected.

Whenever VA is involved in litigation, or occasionally when another party is involved in litigation and VA policies or operations could be affected by the outcome of the litigation, VA would be able to disclose information to the court or parties involved. A determination would be made in each instance that, under the circumstances involved, the purpose served by the use of the information in the particular litigation is compatible with a purpose for which VA collects the information.

8. To individuals, organizations, private or public agencies, etc., with

whom VA has a contract or agreement to perform such services as VA may deem practicable for the purposes of laws administered by VA, in order for the contractor or subcontractor to perform the services of the contract or agreement.

VA must be able to provide information to contractors or subcontractors with whom VA has a contract or agreement in order to perform the services of the contract or agreement.

Release of information from these records will be made only in accordance with the provisions of the Privacy Act of 1974 for investigative, judicial and administrative uses. The Privacy Act permits us to disclose information about individuals without their consent for a routine use when the information will be used for a purpose that is compatible with the purpose for which we collected the information. In all of the routine use disclosures described above, either the recipient of the information will use the information in connection with a matter relating to one of VA's programs, will use the information to provide a benefit to VA, or disclosure is required by law. VA has determined that release of information for these purposes is a necessary and proper use of information and that specific routine uses for transfer of this information are appropriate.

Approved: December 15, 2000.
Hershel W. Gober,
Acting Secretary of Veterans Affairs.

97VA105

SYSTEM NAME:

Consolidated Data Information System-VA.

SYSTEM LOCATION(S):

Records will be maintained at the following computer site locations: VA Management Science Group, 200 Springs Road, Bedford, Massachusetts 01730; and VA Information Resource Center, 5th Avenue & Roosevelt Road, Hines, Illinois 60141. Copies or parts of these records may be maintained at the following computer site locations: VA Automation Center, 1615 Woodward Street, Austin, Texas 78722; and VA Allocation Resource Center, 100 Grandview Road, Braintree, Massachusetts 02184.

CATEGORIES OF INDIVIDUALS COVERED BY THE SYSTEM:

The records include information concerning active duty military personnel, veterans, their spouses and their dependents, and individuals who are not VA beneficiaries, but who receive health care services from VHA.

CATEGORIES OF RECORDS IN THE SYSTEM:

The categories of records in the system will include veterans' names, addresses, dates of birth, VA claim numbers, SSNs, and military service information; medical benefit application and eligibility information; code sheets and follow-up notes; sociological, diagnostic, counseling, rehabilitation, drug and alcohol, dietetic, medical, surgical, dental, psychological, and/or psychiatric medical information; prosthetic, pharmacy, nuclear medicine, social work, clinical laboratory and radiology information; patient scheduling information; family information such as next of kin, spouse and dependents; names, addresses, social security numbers and dates of birth; family medical history, employment information; financial information; third-party health plan information; information related to ionizing radiation and Agent Orange; date of death; VA claim and insurance file numbers; travel benefits information; military decorations; disability or pension payment information; information on indebtedness arising from 38 U.S.C. benefits; medical and dental treatment in the Armed Forces and claim information; applications for compensation, pension, education and rehabilitation benefits; information related to incarceration in a penal institution; medication profile such as name, quantity, prescriber, dosage, manufacturer, lot number, cost and administration instruction; pharmacy dispensing information such as pharmacy name and address.

The records will include information on DoD military personnel from two categories of DoD files: (1) Utilization files that contain inpatient and outpatient records, and (2) eligibility files from the Defense Eligibility Enrollment Reporting System (DEERS) containing data on all military personnel including those discharged from the Armed Services since 1972.

The records will include information on Medicare beneficiaries from HCFA databases: Denominator file (identifies the population being studied); Standard Analytical files (inpatient, outpatient, physician supplier, nursing home, hospice, home care, durable medical equipment); and Group Health Plan.

The records include information on Medicaid beneficiaries' utilization and enrollment from state databases.

AUTHORITY FOR MAINTENANCE OF THE SYSTEM:

Section 527 of 38 U.S.C. and the Government Performance and Results Act of 1993, Pub. L. 103-62.

PURPOSE(S):

The purpose of this system of records is to conduct statistical studies and analyses which will support the formulation of Departmental policies and plans by identifying the total current health care usage of the VA patient population.

ROUTINE USES OF RECORDS MAINTAINED IN THE SYSTEM, INCLUDING CATEGORIES OF USERS AND THE PURPOSE OF SUCH USES:

Information from this system of records may be disclosed in accordance with the following routine uses:

1. Disclosure of identifying information, such as names, SSNs, demographic and utilization data, may be made to Federal, State, local, or tribal agencies such as the DoD, HCFA, and Medicare Payment Advisory Commission (MedPAC), as part of statistical matching programs for the purpose of better identifying the total current health care usage of the patient population served by VA in order to forecast future demand for VA medical care by VA medical facilities.

2. Disclosure may be made to Federal, State, local, and tribal government agencies and national health organizations in order to assist in the development of programs that will be beneficial to claimants and assure that they are receiving all benefits to which they are entitled.

3. Disclosure may be made of information relevant to or indicating a violation or potential violation of law, whether civil, criminal or regulatory in nature, and whether arising by general statute or particular program statute, or by regulation, rule or order issued pursuant thereto, to Federal, State, local, or tribal agencies charged with the responsibility of investigating or prosecuting such violation or charged with enforcing or implementing the statute, or rule, regulation or order listed pursuant thereto.

4. Disclosure may be made, excluding name and address (unless name and address are furnished by the requestor) for research purposes determined to be necessary and proper, to epidemiological and other research facilities approved by the Under Secretary for Health.

5. In order to conduct Federal research necessary to accomplish a statutory purpose of an agency, at the written request of the recipient agency, the name (s) and address (s) of present or former personnel of the Armed Services and/or their dependents may be disclosed (a) To a Federal department or agency or (b) directly to a contractor of a Federal department or agency. When disclosure of this information is

to be made directly to the contractor, VA may impose applicable conditions on the department, agency and/or contractor to insure the appropriateness of the disclosure to the contractor.

6. Disclosure may be made to National Archives and Records Administration (NARA), General Services Administration (GSA) in records management inspections conducted under authority of 44 U.S.C. 2904 and 2906.

7. Records from this system of records may be disclosed to the Department of Justice or in a proceeding before a court, adjudicative body, or other administrative body before which the Agency is authorized to appear when: The Agency, or any component thereof; or any employee of the Agency in his or her official capacity; where the Department of Justice or the Agency has agreed to represent the employee; or the U.S. when the Agency determines that litigation is likely to affect the Agency or any of its components, is a party to litigation, and has an interest in such litigation, and the use of such records by the Department of Justice or the Agency is deemed by the Agency to be relevant and necessary to the litigation provided, however, that the disclosure is compatible with the purpose for which the records were collected.

8. Disclosure may be made to individuals, organizations, private or public agencies, etc., with whom VA has a contract or agreement to perform such services as VA may deem practicable for the purposes of laws administered by VA, in order for the contractor or subcontractor to perform the services of the contract or agreement.

POLICIES AND PRACTICES FOR STORING, RETRIEVING, ACCESSING, RETAINING AND DISPOSING OF RECORDS IN THE SYSTEM:**STORAGE:**

Data are maintained on magnetic tape, disk, or laser optical media.

RETRIEVABILITY:

Records may be retrieved by name, name and one or more criteria (e.g., dates of birth, death and service), SSN or VA claim number.

SAFEGUARDS:

1. Access to and use of these records is limited to those persons whose official duties require such access. Personnel screening is employed to prevent unauthorized disclosure.

2. Access to Automated Data Processing files is controlled at two levels: (1) Terminals, central processing units, and peripheral devices are generally placed in secure areas (areas

that are locked or have limited access) or are otherwise protected; and (2) the system recognizes authorized users by means of an individually unique password entered in combination with an individually unique user identification code.

3. Access to automated records concerning identification codes and codes used to access various VA automated communications systems and records systems, as well as security profiles and possible security violations is limited to designated automated systems security personnel who need to know the information in order to maintain and monitor the security of VA's automated communications and veterans' claim records systems. Access to these records in automated form is controlled by individually unique passwords/codes. Agency personnel may have access to the information on a need to know basis when necessary to advise agency security personnel or for use to suspend or revoke access privileges or to make disclosures authorized by a routine use.

4. Access to VA facilities where identification codes, passwords, security profiles and possible security violations are maintained is controlled at all hours by the Federal Protective Service, VA or other security personnel and security access control devices.

RETENTION AND DISPOSAL:

Copies of back-up computer files will be maintained at VA Management Science Group, Bedford, Massachusetts, and VA Information Resource Center, Hines, Illinois.

Records will be maintained and disposed of in accordance with the records disposal authority approved by the Archivist of the United States, the National Archives and Records Administration, and published in Agency Records Control Schedules.

SYSTEM MANAGER AND ADDRESS:

Director, Management Science Group, VA Medical Center, 200 Springs Road, Bedford, Massachusetts 01730.

NOTIFICATION PROCEDURE:

Individuals wishing to inquire whether this system of records contains information about them should submit a signed written request to the Director, Management Science Group, VA Medical Center, 200 Springs Road, Bedford, Massachusetts 01730.

RECORDS ACCESS PROCEDURES:

An individual who seeks access to records maintained under his or her name or other personal identifier may write the System Manager named above

and specify the information being contested.

CONTESTING RECORD PROCEDURES:

(See Records Access Procedures above.)

RECORD SOURCE CATEGORIES:

Information may be obtained from the Patient Medical Records System (24VA136); Patient Fee Basis Medical and Pharmacy Records (23VA136); Veterans and Beneficiaries Identification and Records Location Subsystem (38VA23); Compensation, Pension, Education and Rehabilitation Records (58VA21/22); and Automated Medication Processing Records (56VA119); DoD utilization files and DEERS files; and HCFA Denominator file, Standard Analytical files (inpatient, outpatient, physician supplier, nursing home, hospice, home care, durable medical equipment) and Group Health Plan, and State Medicaid beneficiaries' utilization and enrollment databases.

[FR Doc. 01-1112 Filed 1-12-01; 8:45 am]

BILLING CODE 8320-01-M

DEPARTMENT OF VETERANS AFFAIRS

Privacy Act of 1974; System of Records

AGENCY: Department of Veterans Affairs (VA).

ACTION: Notice of New System of Records "Agent Orange Registry—VA".

SUMMARY: The Privacy Act of 1974 (5 U.S.C. 552(e)(4)) requires that all agencies publish in the *Federal Register* a notice of the existence and character of their systems of records. Notice is hereby given that the Department of Veterans Affairs (VA) is establishing a new system of records entitled, "Agent Orange Registry—VA" (105VA131).

DATES: Comments on the establishment of this system of records must be received no later than February 15, 2001. If no public comment is received, the new system will become effective February 15, 2001.

ADDRESSES: Written comments concerning the proposed new system of records may be submitted to the Office of Regulations management (02D), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420. Comments will be available for public inspection at the above address in the Office of Regulatory Management, Room 1158, between the hours of 8 a.m. and 4:30 p.m., Monday through Friday (except holidays).

FOR FURTHER INFORMATION CONTACT: Veterans Health Administration Privacy

Act Officer (193B2), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (727) 320-1839.

SUPPLEMENTARY INFORMATION:

1. Description of the Proposed Systems of Records.

The Agent Orange Registry located at the Austin Automation Center (AAC), Austin, Texas, is an automated integrated system containing demographic and medical data of registry examinations from 1988 until such time as the VA Secretary or Congress by law ends the registry program. These data were entered manually on code sheets by VA facility staff and copies sent to the AAC for entry into the Agent Orange Registry data set.

The purpose of this Agent Orange Registry system of records is to provide information about veterans who have had an Agent Orange Registry examination at a VA facility; to assist in generating hypotheses for research studies; provide management with the capability to track patient demographics; report birth defects among veteran's children; dioxin-related diseases; planning and delivery of health care services and associated costs; and with relation to claims for compensation may assist in the adjudication of claims possibly related to herbicide exposure although more comprehensive medical records are required for evaluation of subject claims.

II. Proposed Routine Use Disclosures of Data in the System

We are proposing to establish the following routine use disclosures of information which will be maintained in the system:

1. The record of an individual who is covered by this system may be disclosed to a member of Congress or staff person acting for the member when the member of staff person requests the record on behalf of, and at the written request of, that individual.

Individuals sometimes request the help of a member of Congress in resolving some issue relating to a matter before VA. The member of Congress then writes VA, and VA must be able to give sufficient information to be responsive to the inquiry.

2. Disclosure of records covered by this system, as deemed necessary and proper to named individuals serving as accredited service organization representatives and other individuals named as approved agents or attorneys for a documented purpose and period of time, to aid beneficiaries in the

Appendix B

CMS Data Use Agreement for the VIREC analysis of 1999 data



DEPARTMENT OF HEALTH & HUMAN SERVICES

APPENDIX B

OCT 24 REC'D *AK*

Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

October 1, 2001

Dr. Denise Hynes
Department of Veterans Affairs
VA Information Resource Center
5th Avenue & Roosevelt Road
Hines, Illinois 60141

Dear Dr. Hynes:

Enclosed is an official copy of the signed Data Use Agreement (DUA) you have entered into with the Centers for Medicare & Medicaid Services (CMS). This copy is for your records so that you may refer to it for information regarding the use of the data and/or the data access privileges you have received from HCFA. Please refer to DUA number 11430 for your project entitled, "Access, Use and Cost of Medicare and VA Services by Veterans" when addressing inquiries of any nature concerning this agreement.

I have also enclosed the CMS DUA Guidelines which outlines your responsibilities in terms of safeguarding the confidentiality of HCFA data. If you have any questions about this DUA or the use of the HCFA data, you may contact me at (410) 786-0757.

Sincerely,

Maribel Franey
Division of Data Liaison and Distribution
Enterprise Databases Group
Office of Information Services

Enclosures

cc: Paul Eggers, NIDDK

DATA USE AGREEMENT

**(AGREEMENT FOR USE OF HEALTH CARE FINANCING ADMINISTRATION
(HCFA) DATA CONTAINING INDIVIDUAL-SPECIFIC INFORMATION)**

In order to secure data that resides in a HCFA Privacy Act System of Records, and in order to ensure the integrity, security, and confidentiality of information maintained by the HCFA, and to permit appropriate disclosure and use of such data as permitted by law, HCFA and the Department of Veterans Affairs (VA) Information Resource Center (VIREC) enter into this agreement to comply with the following specific paragraphs.

1. This Agreement is by and between the Health Care Financing Administration (HCFA), a component of the U.S. Department of Health and Human Services (DHHS), and the VIREC, hereinafter termed A User.
2. This Agreement addresses the conditions under which HCFA will disclose and the User will obtain and use the HCFA data file(s) specified in section 7. This Agreement supersedes any and all agreements between the parties with respect to the use of data from the files specified in section 7 and preempts and overrides any instructions, directions, agreements, or other understanding in or pertaining to any grant award or other prior communication from the Department of Health and Human Services or any of its components with respect to the data specified herein. Further, the terms of this Agreement can be changed only by a written modification to this Agreement or by the parties adopting a new agreement. The parties agree further that instructions or interpretations issued to the User concerning this Agreement or the data specified herein, shall not be valid unless issued in writing by the HCFA point-of-contact specified in section 5 or the HCFA signatory to this Agreement shown in section 22.
3. The parties mutually agree that HCFA retains all ownership rights to the data file(s) referred to in this Agreement, and that the User does not obtain any right, title, or interest in any of the data furnished by HCFA.
4. The parties mutually agree that the following named individual is designated as ACustodian of the file(s) on behalf of the User and will be personally responsible for the observance of all conditions of use and for establishment and maintenance of security arrangements as specified in this Agreement to prevent unauthorized use. The User agrees to notify HCFA within fifteen (15) days of any change of custodianship. The parties mutually agree that HCFA may disapprove the appointment of a custodian or may require the appointment of a new custodian at any time.

March 25, 1999

Denise M. Hynes, PhD
Director
Department of Veterans Affairs
VA Information Resource Center
5th Avenue & Roosevelt Road
Hines, IL 60141
Telephone: 708.202.2413
E:mail: hynes@research.hines.med.va.gov

5. The parties mutually agree that the following named individual will be designated as A point-of-contact for the Agreement on behalf of HCFA.

Maribel Franey
(Name of Contact)

OIS/EDG/DDLD
(Title/Component)

7500 SECURITY BLVD.
(Street Address)

N2-04-27
(Mail Stop)

BALTIMORE, MARYLAND 21244
(City/State/ZIP Code)

(410) 786-0757 MFRaney@CMS.HHS.GOV
(Phone No. - Including Area Code and/E-Mail Address, If Applicable)

6. The User represents and warrants, and in furnishing the data file(s) specified in section 7 HCFA relies upon such representation and warranty, that such data file(s) will be used solely for the following purpose(s).

See Enclosure A.
"Access, Use and Cost of Medicare and VA Services"

*Co-custodian
w/ Denise Hynes*

Steven M. Wright, Ph.D.
(Name of Custodian)

VA Boston Healthcare System
(Company/Organization)

150 S. Huntington Ave
(Street Address)

Jamaica Plain, MA 02131
(City/State/ZIP Code)

617-232-9500 x6294 Steven.Wright@hq.med.va.gov
(Phone No. - Including Area Code and E-Mail Address, If Applicable)

5. The parties mutually agree that the following named individual will be designated as "point-of-contact" for the Agreement on behalf of HCFA.

Maribel Franey
(Name of Contact)

Health Insurance Specialist
(Title/Component)

7500 SECURITY BLVD.
(Street Address)

N2-04-27
(Mail Stop)

BALTIMORE, MARYLAND 21244-1850
(City/State/ZIP Code)

(410) 786-0757 Mfraney@CMS.HHS.GOV
(Phone No. - Including Area Code and E-Mail Address, If Applicable)

6. The User represents and warrants, and in furnishing the data file(s) specified in section 7 HCFA relies upon such representation and warranty, that such data file(s) will be used solely for the following purpose(s).

Denise Hynes Study
"Access, Use and Cost of Medicare and VA services"

The User represents and warrants further that the facts and statements made in any study or research protocol or project plan submitted to HCFA for each purpose are complete and accurate. Further, the User represents and warrants that said study protocol(s) or project plans, as have been approved by HCFA or other appropriate entity as HCFA may determine, represent the total use(s) to which the data file(s) specified in section 7 will be put.

The User represents and warrants further that, except as specified in an Attachment to this Agreement or except as HCFA shall authorize in writing, the User shall not disclose, release, reveal, show, sell, rent, lease, loan, or otherwise grant access to the data covered by this Agreement to any person. The User agrees that, within the User organization, access to the data covered by this Agreement shall be limited to the minimum number of individuals necessary to achieve the purpose stated in this section and to those individuals on a need-to-know basis only.

The following HCFA data file(s) is/are covered under this Agreement.

File	Year(s)
Denominator Files	1999
MEDPAR (Short stay, Long stay, SNF)	1999
Physician Supplier Part B Standard Analytical File (SAF)	1999
Outpatient SAF	1999
Home Health Agency SAF	1999
Hospice SAF	1999
Durable Medical Equipment	1999
Group Health Plan	1999
ESRD	1999 ← Paul Eggers process

8. The parties mutually agree that the aforesaid file(s) (and/or any derivative file(s) [includes any file that maintains or continues identification of individuals]) may be retained by the User until 2006, hereinafter known as the Retention date. The User agrees to notify HCFA within 30 days of the completion of the purpose specified in section 6 if the purpose is completed before the aforementioned retention date. Upon such notice or retention date, whichever occurs sooner, HCFA will notify the User either to return all data files to HCFA at the User's expense or to destroy such data. If HCFA elects to have the User destroy the data, the User agrees to certify the destruction of the files in writing within 30 days of receiving HCFA's instruction. A statement certifying this action must be sent to HCFA. If HCFA elects to have the data returned, the User agrees to return all files to HCFA within 30 days of receiving notice to that effect. The User agrees that no data from HCFA records, or any parts thereof, shall be retained when the aforementioned file(s) are returned or destroyed unless authorization in writing for the retention of such file(s) has been received from the appropriate Systems Manager or the person designated in item No. 22 of this Agreement. The User acknowledges that stringent adherence to the aforementioned retention date is required, and that the User shall ask HCFA for instructions under this paragraph if instructions have not been received after 30 days after the retention date.

9. The User agrees to establish appropriate administrative, technical, and physical safeguards to protect the confidentiality of the data and to prevent unauthorized use or access to it. The safeguards shall provide a level and scope of security that is not less than the level and scope of security established by the Office of Management and Budget (OMB) in OMB Circular No. A-130, Appendix III--Security of Federal Automated Information Systems, which sets forth guidelines for security plans for automated information systems in Federal agencies. The User acknowledges that the use of unsecured telecommunications, including the Internet, to transmit individually identifiable or deducible information derived from the file(s) specified in section 7 is prohibited. Further, the User agrees that the data must not be physically moved or transmitted in any way from the site indicated in item number 4 without written approval from HCFA.

10. The User agrees that the authorized representatives of HCFA or DHHS Office of the Inspector General will be granted access to premises where the aforesaid file(s) are kept for the purpose of inspecting security arrangements confirming whether the User is in compliance with the security requirements specified in paragraph 9.

11. The User agrees that no findings, listing, or information derived from the file(s) specified in section 7, with or without identifiers, may be released if such findings, listing, or information contain any combination of data elements that might allow the deduction of a beneficiary's identification without first obtaining written authorization from the appropriate System Manager or the person designated in item number 22 of this Agreement. Examples of such data elements include but are not limited to geographic indicator, age, sex, diagnosis, procedure, admission/discharge date(s), or date of death. The User agrees further that HCFA shall be the sole judge as to whether any finding, listing, information, or any combination of data extracted or derived from HCFA's files identifies or would, with reasonable effort, permit one to identify an individual or to deduce the identity of an individual to a reasonable degree of certainty.

12. The User agrees that, absent express written authorization from the appropriate System Manager or the person designated in item number 22 of this Agreement to do so, the User shall make no attempt to link records included in the file(s) specified in section 7 to any other identifiable source of information. This includes attempts to link to other HCFA data file(s). The inclusion of linkage of specific files in a study protocol approved in accordance with section 6 is considered express written authorization from HCFA.

13. The User agrees to submit to HCFA a copy of all findings within 30 days of making such findings. The parties mutually agree that the User has Amade findings with respect to the data covered by this Agreement when the User prepares any report or other writing for submission to any third party (including but not limited to any manuscript to be submitted for publication) concerning any purpose specified in section 6 (regardless of whether the report or other writing expressly refers to such purpose, to HCFA, or to the files specified in section 7 or any data derived from such files). The User agrees not to submit such findings to any third party until receiving HCFA's approval to do so. HCFA agrees to make determination about approval and to notify the user within 4 to 6 weeks after receipt of findings. HCFA review of the findings is for the sole purpose of assuring that data confidentiality is maintained and that individual

beneficiaries could not be identified. HCFA may withhold approval for publication only if it determines that the format in which data are presented may result in identification of individual beneficiaries could not be identified. The User agrees further to submit its findings to the National Technical Information Service (NTIS, 5285 Port Royal Road, Springfield, Virginia 22161) within 30 days of receiving notice from HCFA to do so.

14. The User understands and agrees that they may not reuse original or derivative data file(s) without prior written approval from the appropriate System Manager or the person designated in section 22 of this Agreement.

15. The parties mutually agree that the following specified Attachments are part of this Agreement:

Enclosure A

16. The User agrees that in the event HCFA determines or has a reasonable belief that the User has made or may have made disclosure of the aforesaid file(s) that is not authorized by this Agreement or other written authorization from the appropriate System Manager or the person designated in item number 22 of this Agreement, HCFA in its sole discretion may require the User to: (a) promptly investigate and report to HCFA the User's determinations regarding any alleged or actual unauthorized disclosure; (b) promptly resolve any problems identified by the investigation; (c) if requested by HCFA, submit a formal response to an allegation of unauthorized disclosure; (d) if requested by HCFA, submit a corrective action plan with steps designed to prevent any future unauthorized disclosures; and (e) if requested by HCFA, return data files to HCFA. The User understands that as a result of HCFA's determination or reasonable belief that unauthorized disclosures have taken place, HCFA may refuse to release further HCFA data to the User for a period of time to be determined by HCFA.

17. The User hereby acknowledges that criminal penalties under § 1106(a) of the Social Security Act (42 U.S.C. § 1306(a)), including a fine not exceeding \$1,000 or imprisonment not exceeding 5 years, or both, may apply with respect to any disclosure of information in the file(s) specified in section 7 that is inconsistent with the terms of this Agreement. The User further acknowledges that criminal penalties under the Privacy Act (5 U.S.C. § 552a(i) (3)) may apply if it is determined that the Requestor or Custodian, or any individual employed or affiliated therewith, knowingly and willfully obtained the file(s) under false pretenses. Any person found guilty under the Privacy Act shall be guilty of a misdemeanor and fined not more than \$5,000. Further, the User acknowledges that criminal penalties may be imposed under 18 U.S.C. § 641, which provides that if it is determined that the User, or any individual employed or affiliated therewith, has taken or converted to his own use data file(s), or received the file(s) knowing that they were stolen or converted, they shall be fined under Title 18, imprisoned not more than 10 years, or both. In addition, the User and any individual employed or affiliated therewith, may be subject to civil suit under the Privacy Act for damages which occur as a result of willful or intentional actions which violate an individual's rights under the Privacy Act.

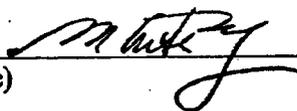
Hynes

May 2001

18. By signing this Agreement, the User agrees to abide by all provisions set out in this Agreement for protection of the data file(s) specified in section 7, and acknowledges having received notice of potential criminal, administrative, or civil penalties for violation of the terms of the Agreement.

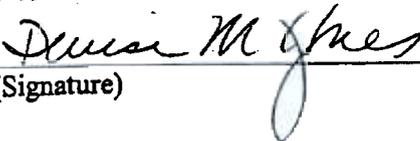
19. On behalf of the User the undersigned individual hereby attests that he or she is authorized to enter into this Agreement and agrees to all the terms specified herein.

Rita M. Young, PhD
Associate Chief of Staff, Research Service
Edward Hines, Jr. VA Hospital (151)
Department of Veteran's Affairs
5th Avenue & Roosevelt Road
Hines, IL 60413
Telephone: 708.202.5689
E-mail: rita.young@med.va.gov


(Signature) 5/23/01
(Date)

20. The Custodian, as named in paragraph 4, hereby acknowledges his/her appointment as Custodian of the aforesaid file(s) on behalf of the User, and agrees personally and in a representative capacity to comply with all of the provisions of this Agreement on behalf of the User.

Denise M. Hynes, PhD
(Typed or Printed Name and Title of Custodian of File(s))


(Signature) 5/23/01
(Date)

21. On behalf of _____ the undersigned individual hereby acknowledges that the aforesaid Federal agency sponsors or otherwise supports the User's request for and use of HCFA data, agrees to support HCFA in ensuring that the User maintains and uses HCFA's data in accordance with the terms of this Agreement, and agrees further to make no statement to the User concerning the interpretation of the terms of this Agreement and to refer all question of such interpretation or compliance with the terms of this Agreement to the HCFA official named in section 22 (or to his or her successor).

(Typed or Printed Name and Title of Federal Representative)

(Signature)

(Date)

(Phone No. - Including Area Code and E-Mail Address, If Applicable)

22. On behalf of HCFA the undersigned individual hereby attests that he or she is authorized to enter into this Agreement and agrees to all the terms specified herein.

NARIBEL FRANEY
(Typed or Printed Name and Title of HCFA Representative)

Naribel Franey
(Signature)

8/14/2001
(Date)

23. The disclosure provision(s) that allows the discretionary release of HCFA data for the purpose(s) stated in paragraph 6 follow(s). (To be completed by HCFA staff.)

**Centers for Medicare & Medicaid Services (CMS)
Data Use Agreement (DUA) Guidelines**

- 1 Requestor agrees to notify CMS if project is completed sooner than the expiration date specified in the DUA.

Requestor agrees that any data provided by CMS will not be physically moved or Electronically transmitted in any way from the site indicated in the DUA.

3. Upon completion of project and/or expiration of the DUA, the data must be returned to CMS at the requestor's expense, or destroyed and a statement certifying this action sent to CMS. The Requestor agrees that no data, copies, or parts thereof, shall be retained when the file(s) are returned or destroyed, unless CMS has authorized in writing such retention of said file(s). These options are explained below:

- a. Return data (and any derivative files) to CMS along with a letter delineating the data set names and volume/serial numbers of the files being returned. The letter should reference the DUA number and study name. This letter and the data should be sent to the following address:

**Centers for Medicare & Medicaid Services
CMS Data Center
North Building
Attention: Data Release Area
7500 Security Boulevard
Baltimore, Maryland 21244-1850; or**

- b. Destroy data and provide a letter CMS on your organization's letterhead certifying that this action has taken place.. This letter must also reference the DUA number and study name and delineate the data set names and volume/serial numbers of the files being destroyed. Requestor should forward to:

**Ned Burford, Director DDL
Centers for Medicare & Medicaid Services
Division of Data Liaison & Distribution (DDL)
Enterprise Databases Group
7500 Security Boulevard
Mailstop: N2-04-27
Baltimore, Maryland 21244-1850**

4. If the project is still active and the DUA has expired, a one (1) year extension may be granted. The request for extension will only be granted if the data will continue to be used for the original project purpose and the expiration date has occurred within the past year; otherwise, a new DUA must be negotiated. The letter of request for extension should be directed to the name and address in item 3b above.

Appendix C

CMS Memorandum of Understanding, July 24, 2002

APPENDIX C

MEMORANDUM OF UNDERSTANDING BETWEEN:

THE CENTERS FOR MEDICARE & MEDICAID SERVICES
OFFICE OF INFORMATION SERVICES
ENTERPRISE DATABASES GROUP
AND
DEPARTMENT OF VETERANS AFFAIRS
OFFICE OF POLICY AND PLANNING (105), MANAGEMENT SCIENCE GROUP

SCOPE AND PURPOSE

The Department of Veterans Affairs (VA) Office of Policy and Planning (105), Management Science Group (MSG) agrees to reimburse the Centers for Medicare & Medicaid Services (CMS) for data and services rendered to facilitate analysis of Medicare data for program administration and operational purposes. The analysis will be operated under the terms of this memorandum and accompanying data use agreement (DUA). This information is maintained in VA's system of records (SOR) entitled "Consolidated Data Information System-VA." The linkage of VA and CMS data would in no way adversely impact the VA beneficiary.

The purpose of this memorandum is to establish funding and logistical arrangements in order to obtain multi-year Medicare records of beneficiaries who have been identified as current users and other eligible veterans of the U.S. Department of Veterans Affairs health care system. It identifies the MSG as the VA point-of-contact to liaison with CMS regarding data requests, technical data issues, and initial processing of Medicare data files.

II. JUSTIFICATION

Evaluating whether veterans' health care needs are being met requires information about the full spectrum of health care service use. Medicare eligible veterans are especially important because they may require greater health care use due to their advancing age and/or disability status. However, VA must obtain individual claims data from CMS in order to ascertain information about Medicare-covered service use.

As a required step in this process, VA has established the legal basis to develop the new, combined data sets to be merged with CMS data sets. VA has established a new system of records entitled "Consolidated Data Information System - VA" (97VA105) at 66 *Federal Register* 3650 (January 16, 2001) in accordance with the requirements of the Privacy Act of 1974, as amended. A copy of the system notice is given in Attachment B. The new database will be configured to interact with current VA automated record systems as well as CMS automated records to produce reports for statistical analyses. Statistical reports will not contain personal identifiers.

Approximately one-half of users of the VA health care system also have Medicare coverage by virtue of their age or disability status. Policy makers and researchers need information from CMS databases to determine the extent of Medicare use by veterans.

This project would yield a much needed linkage between CMS and VA health care databases without compromising patient confidentiality or breaching existing agency database release agreements.

III. SCOPE OF WORK AND RESPONSIBILITIES

The scope of the proposed analysis may include reports on access and utilization of VA and Medicare services; dual use of both VA and non-VA sources for patient, market, and system characteristics; and the costs associated with VA and Medicare covered services. These reports may also include economic analyses of the data such as enrollee risk assessment, demand estimation, average enrollee expenditure, estimates of market structure and simulations of CMS and VA revenue streams allocated to treat each patient. VA will maintain and use the merged data under the terms of this memorandum and DUA. Reported findings will have individual identifiers removed so that it is not possible to identify living persons.

The files with individual identifiers to be used for the proposed analysis and maintained in the new system of records are covered by the Privacy Act and shall be used for this specific project and no other. This work will be performed on an annual basis, with quarterly updates of enrollment information or as the data becomes available in order to produce the merged data on an ongoing basis under this project. Previously acquired data obtained under a research protocol may be used by VA for inclusion in the analysis and will be subject to the terms of this memorandum and DUA. The core data files requested by the VA are specified in Attachment A.

VA will:

- (1) provide computer cartridge tapes of a finder file comprising SSNs for current VHA users and other eligible veterans to CMS.
- (2) specify the specific CMS data files and data fields for extraction, provided in Attachment A.
- (3) provide funding for data processing to extract data from CMS databases,
- (4) merge the VA and CMS files and prepare customized patient-level files for its own use.
- (5) maintain this information in the VA system identified as 97VA105, entitled "Consolidated Data Information System-VA," last published at 66 Fed. Reg. 3650 (January 16, 2001).
- (6) provide feedback to CMS on data quality issues.
- (7) provide CMS with a quarterly new SSN file that reflects the new SSNs who have entered the system during that quarter.

CMS will:

- (1) create a cross reference file from all VA input SSNs and then extract all records for the files listed in Attachment A.
- (2) provide computer cartridge tapes of the data to VA.
- (3) provide documentation for all data, preferably in electronic format.

- (4) provide technical support to VA staff for processing and management of merged data.
- (5) augment existing data under VA custody by extracting all claims and enrollment information on a supplementary finder file of persons eligible for VA benefits since the 1997, 1998, and 1999 finder files were processed.
- (6) merge the quarterly new SSN data with the Enrollment Database (EDB) and provide extract for matching records. EDB variables (e.g., Medicare enrollment status) will be pre-specified by VA.

Combined responsibilities:

- (1) Both agencies will cooperate in the transfer of data and in the design of the database.
- (2) Depending upon the interests of each agency, analytic files may be developed collaboratively.
- (3) Patient identifiable data may be released to other organizations or individuals only for research purposes, and will be released only with the approval of CMS and VA.

VA and CMS agree to the following annual and quarterly data match schedule:

June	VA submits a complete file of VA eligibles to CMS.
July	CMS completes the enrollment database (EDB) match of the VA eligibles, as well as the cross-referencing to produce a HIC finder of all matched Medicare beneficiaries to deliver to VA.
August	CMS begins the match of the HIC finder against the prior calendar year's claim files. Claims will be delivered to VA on a flow basis as the extract jobs complete.
October	All claims extract jobs should be delivered to VA.

October, January, April, and July are the months that VA submits quarterly files of new enrollee/users of the VA healthcare system. CMS will deliver to VA EDB matches of VA eligibles as soon as possible or within a month of the quarterly submission.

IV. RETENTION AND DISPOSITION OF IDENTIFIABLE DATA

VA will retain records received from CMS for a period not to exceed 5 years from the signing date. After that time, data will be destroyed or the VA will request permission to extend the use of the data.

CMS will retain the VA finder information for 1 quarter from the date of receipt to provide for VA data requests. After that time, the VA data will be returned.

V. SECURITY PROCEDURES

VA and CMS will safeguard the information being exchanged in the following manner:

The material/information contained in VA files falls under the purview of the Privacy Act of 1974, as amended, and will be safeguarded as required by the Privacy Act, to include those safeguards set forth in the SOR notice and OMB Circular A-130.

CMS will comply with all Federal laws, guidance, and policies for all automated information systems security. For computerized records, safeguards have been established in accordance with the Privacy Act of 1974, as amended; the OMB Circular A-130, revised; Information Resource Management Circular No. 10; HHS Automated Information Systems Security Program; CMS's IT Systems Security Policies, Standards, and Guidelines Handbook;" and other CMS systems security policies.

For both Agencies, VA and CMS, access to the records will be restricted to only those authorized employees and officials who need the records to perform their official duties in connection with the uses of the information authorized in this memorandum and DUA. Personnel with access to the records will be advised of the confidential nature of the information and the civil and criminal sanctions for non-compliance with the applicable Federal laws.

VI. RECORDS USAGE, DUPLICATION AND DATA SHARING RESTRICTIONS

The files exchanged under this memorandum remain the property of the providing agency and will be destroyed after activity involving the files has been completed under this program as provided above in Section V.

The data exchanged under this memorandum will be used and accessed only for the purposes described under the appropriate legislative provisions outlined in Section II of this Agreement.

Neither VA nor CMS will extract information from the electronic data files concerning the individuals that are described therein for any purpose not stated in this memorandum.

Except as provided in this memorandum, neither VA nor CMS will share the data produced or the results of analyses without the disclosing Agency's permission. Neither Agency shall give such permission unless the sharing is required by law or is essential to the conduct of the analysis. In such cases, VA and CMS will specify in writing what records are being shared, who is requesting data, and the reason for the request. CMS agrees to respond to VA data sharing requests within 2 business days of the receipt of such letter after examining. A DUA, with language consistent with the terms in this MOU, is required of all parties receiving Medicare data.

MSG will provide a mirror copy of the data received from CMS to the VA Information Resource Center (VIREC). As an additional custodian of the data, VIREC may share Medicare data with VA research investigators who may use the data for VA program administration purposes. VIREC will directly submit to CMS data sharing requests and must insure that DUAs are completed for each request.

MSG may also share Medicare data with additional VA administrative staff whose professional responsibilities require use of the data within the VA. Data sharing letter and completed DUA are required. MSG also may provide Medicare data to VA authorized contractors whose contract responsibilities require use of the data. In addition to submitting a sharing letter to CMS, such authorized contractors must sign a DUA restricting their use of the data to only those purposes specified in the contract with VA. At the completion of such contract, all data must be returned to VA.

REVIEW PROCEDURES

Any report or other writing based on findings from the data covered by this memorandum and DUA must be reviewed by CMS prior to submission to any third party (including but not limited to any manuscript to be submitted for publication). Such report or other writing does not include Congressional testimony, or other releases to Congress or the Executive branch. CMS agrees to make a determination about approval and to notify the user within 7 business days after receipt of findings. CMS review of the findings is for the sole purpose of assuring that data confidentiality is maintained and that individual beneficiaries cannot be identified.

DURATION

This memorandum and DUA shall be effective upon the signature of all parties and shall remain in effect until 2006 unless terminated in writing in accordance with section IX of this memorandum.

IX. AMENDMENTS/CANCELLATIONS

This memorandum, or any of its provisions may be revised or amended with the signature approval of both parties signatory to the memorandum or of their respective official successors. Cancellation may be made upon 30 day written notice by either part, or their successors, to the other.

X. LIASON

The VA project officers shall be:

Theodore Stefos, Ph.D. Phone – 781-687-2440
Department of Veterans Affairs Email – theodore.stefos@med.va.gov
Management Science Group
200 Springs Road
Bedford, MA 01730

Steven M. Wright, Ph.D Phone – 202-273-8413
Department of Veterans Affairs or 617-232-9500 x6294
Office of Quality and Performance Email – steven.wright@hq.med.va.gov
810 Vermont Ave., NW
Washington, D.C.

Gregg A. Pane, MD Phone – 202-273-8932
Department of Veterans Affairs Email – gregg.pane@hq.med.va.gov
Office of Policy and Planning
810 Vermont Ave., NW
Washington, D.C.

The CMS project officer shall be:

John Booth Phone – 410-786-6900
Centers for Medicare & Medicaid Services Email – jbooth1@cms.hhs.gov
Enterprise Databases Group
Office of Information Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

The CMS project coordinator is:

Maribel Franey Phone – 410-786-0757
Centers for Medicare & Medicaid Services Email – mfraney@cms.hhs.gov
Enterprise Databases Group
Office of Information Services, N2-04-27
7500 Security Boulevard
Baltimore, Maryland 21244-185

XI. DUPLICATION AND REQUIREMENTS

There is no duplication or conflict with existing agreements, policy or Statute. The applicable requirements of the Privacy Act have been taken into account in the implementation of the Agreement. The provisions of the Computer Matching Act do not apply to the activities to be undertaken by the parties under this Agreement.

XIII. SIGNATURE OF AGREEMENT

APPROVED AND ACCEPTED FOR THE DEPARTMENT OF VETERANS
AFFAIRS, VETERANS HEALTH ADMINISTRATION

By: Jonathan B. Perlin Date: 7/16/02
Jonathan B. Perlin, MD, PhD., MSHA, FACP
Acting Deputy Under Secretary for Health

APPROVED AND ACCEPTED FOR THE DEPARTMENT OF HEALTH AND
HUMAN SERVICES, CENTERS FOR MEDICARE & MEDICAID SERVICES

By: John Booth Date: 7/24/02
John Booth
Director, Enterprise Databases Group

ATTACHMENT A

Data Files Needed from CMS

1. Denominator File
2. Home Health Agency
3. Hospice
4. MEDPAR - Inpatient
5. Physician/Supplier Part B
6. Outpatient
7. Skilled Nursing Facility
8. Durable Medical Equipment
9. Group Health Plan
10. Provider of Service
11. Cross reference file
12. SSN Conversion File
13. EDB User View

payable under Title II of the Social Security Act.
 On October 24, 2000, for the period beginning December 1, 2000, the Social Security Administration announced at 65 FR 63663 of the Federal Register, a 3.5 percent cost-of-living increase in Social Security Benefits under Title II of the Social Security Act. The Veteran Benefits Administration has indicated Pension benefits will be increased by a 3.5 percent cost-of-living increase effective December 1, 2000. Therefore, applying the same percentage and rounding up in accordance with 38 CFR 3.29, the following income limitations for the Means Test Thresholds will be effective January 1, 2001.

TABLE 1.—MEANS TEST THRESHOLDS

(1) Veterans with no dependents:	
(a) Means Test Co-payment Exempt Category	23,688
(b) Means Test Co-payment Required Category	23,689
(2) Veterans with 1 dependent:	
(a) Means Test Co-payment Exempt Category	28,429
(b) Means Test Co-payment Required Category	28,430
(3) Veterans with 2 dependents:	
(a) Means Test Co-payment Exempt Category	30,015
(b) Means Test Co-payment Required Category	30,016
(4) Veterans with 3 dependents:	
(a) Means Test Co-payment Exempt Category	31,601
(b) Means Test Co-payment Required Category	31,602
(5) Veterans with 4 dependents:	
(a) Means Test Co-payment Exempt Category	33,187
(b) Means Test Co-payment Required Category	33,188
(6) Veterans with 5 dependents:	
(a) Means Test Co-payment Exempt Category	34,773
(b) Means Test Co-payment Required Category	34,774
(7) Child Income Exclusion is:	7,450
(8) The Medicare deductible is:	792
(9) Maximum annual Rate of Pension effective December 1, 2000 are:	
(a) The base rate is	9,304
(b) The base rate with one dependent is	12,186
(c) Add 1,586 each additional dependent.	

DEPARTMENT OF VETERANS AFFAIRS

Privacy Act of 1974; System of Records

AGENCY: Department of Veterans Affairs.
 ACTION: Report of New System of Records—Consolidated Data Information System—VA (97VA105).

SUMMARY: The Privacy Act of 1974 (5 U.S.C. 552(e)(4)) requires that all agencies publish in the Federal Register a notice of the existence and character of their system of records. Notice is hereby given that VA is adding a new system of records entitled "Consolidated Data Information System—VA" (97VA105).

DATES: Comments on the establishment of the new system of records must be received no later than February 15, 2001. If no public comment is received during the period allowed for comment or unless otherwise published in the Federal Register by VA, the system will become effective February 15, 2001.

ADDRESSES: Comments may be submitted to Director, Office of Regulations Management (02D), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420. Comments will be available for public inspection at the above address in the Office of Regulations Management, Room 1176, between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday, excluding Federal holidays.

FOR FURTHER INFORMATION CONTACT: Veterans Health Administration Privacy Act Officer (193B2), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (727) 320-1839.

SUPPLEMENTARY INFORMATION: Under Section 527 of Title 38, U.S.C., and the Government Performance and Results Act of 1993, Pub. L. 103-62, VA is required to measure and evaluate, on an ongoing basis, the effectiveness of VA benefit programs and services. In performing this required function, VA must collect, collate and analyze full statistical data regarding participation, provision of services, categories of beneficiaries, and planning of expenditures for all VA programs. For this reason, VA is establishing a new system of records, which combines information from several existing systems of records with information from non-VA sources. This combined database is necessary for VA to accurately and timely assess the current health care usage by the patient population served by VA, to forecast

future demand for VA medical care by individuals currently eligible for service by VA medical facilities, and to understand the numerous implications of cross-utilization between VA and non-VA health care systems.

Records from the Patient Medical Record System (24VA136), the Patient Fee Basis Medical and Pharmacy Records (23VA136), Veterans and Beneficiaries Identification and Records Location Subsystem (38VA23), Compensation, Pension, Education and Rehabilitation Records (58VA21/22), and Automated Medication Processing Records (56VA119) will be incorporated into this new system of records. Specific request files will be created for use in submitting requests for veteran-specific data from the Health Care Financing Administration (HCFA), the Department of Defense (DoD), and other non-VA data sources including state Medicaid databases. The new database will be created by including Medicare data records on utilization and enrollment for all VA users, enrollees and special category veterans. Utilization and enrollment data will also be extracted from the DoD military personnel system of records in order to supplement VA's database. This system will not be used by VA to make any determinations as to individual veteran's benefits. Because the exchange of data among VA, HCFA, DoD, and any other non-VA agencies will be only for the purpose of identifying current health care usage and forecasting future health care usage by VA beneficiaries, the computer matching provision of the Privacy Act does not apply.

VA will maintain the system of records in electronic form at VA Management Science Group, Bedford, Massachusetts, and VA Information Resource Center, Hines, Illinois. Copies or parts of these records may be maintained at VA Automation Center, Austin, Texas, and VA Allocation Resource Center, Braintree, Massachusetts. Multiple sites are needed because VA data files will be drawn from multiple locations and merged data files will be very large. Data in the system of records will include names, social security numbers (SSNs), demographic and health services utilization data for all VHA users and special veteran populations; inpatient, outpatient, physician supplier, nursing home, hospice, home care, and durable medical equipment data form HCFA; and utilization and enrollment data from DoD. The new database will be used to produce reports for statistical analyses on, for example: (1) The number of Medicare-eligible users who obtain health care services from VA,

Approved: January 5, 2001.
 Hershel W. Gober,
 Acting Secretary of Veterans Affairs.
 [FR Doc. 01-1180 Filed 1-12-01; 8:45 am]
 BILLING CODE 8320-01-P

Medicare, and both VA and Medicare providers (dual use); (2) the number of "dual use" veterans by specific disease categories; and (3) the inpatient, outpatient, and total costs associated with VA services and Medicare covered services by "dual use" veterans. Statistical reports will not contain individually identifiable health information.

We are proposing to establish the following routine use disclosures of information which will be maintained in the system:

1. To Federal, State, and local agencies for the purpose of better identifying the total current health care usage of the patient population by VA, to forecast future demand for VA medical care, and as part of statistical matching programs.

VA needs to obtain information from other agencies in order to collect full statistical data regarding participation and provision of services to the patient population served by VA as well as non-VA health care systems. The records may also be disclosed as part of statistical matching programs to accomplish these purposes.

2. To Federal, State and local government agencies and national health organizations in order to assist in the development of programs that will be beneficial to claimants and to protect their rights under law and assure that they are receiving all benefits to which they are entitled.

VA needs to obtain information from other agencies in order to measure and evaluate, on an ongoing basis, the effectiveness of VA benefit programs and services.

3. To a Federal, State, or local agency charged with the responsibility of investigating or prosecuting civil, criminal or regulatory violations of law, or charged with enforcing or implementing the statute, regulation, rule or order issued pursuant thereto. The names and addresses of veterans may only be disclosed:

- To a Federal agency when it is relevant to a suspected violation or reasonably imminent violation of law; and

- To a State or local agency under a written request when it is relevant to a suspected violation or reasonably imminent violation of law concerning public health or safety.

VA must be able to comply with the requirements of agencies charged with enforcing the law, and investigations of violations or possible violations of law. VA must also be able to provide information to State or local agencies charged with protecting the public health as set forth in State law.

4. To epidemiological and other research facilities approved by the Under Secretary for Health for research purposes (disclosure excludes names and addresses).

VA must be able to disclose information for research purposes approved by the Under Secretary for Health.

5. To a Federal department or agency or to a contractor of a Federal department or agency in order to conduct Federal research necessary to accomplish a statutory purpose of an agency.

VA must be able to disclose information for research purposes needed to accomplish a statutory purpose of a Federal agency.

6. To the National Archives and Record Administration (NARA) in records management inspections conducted under authority of 44 U.S.C. 2904 and 2906.

NARA is responsible for archiving old records no longer actively used, but which may be appropriate for preservation; they are responsible in general for the physical maintenance of the Federal government's records. VA must be able to turn records over to this agency in order to determine the proper disposition of such records.

7. To the Department of Justice or in a proceeding before a court, adjudicative body, or other administrative body before which the Agency is authorized to appear when the Agency, or any component thereof; or any employee of the Agency in his or her official capacity; where the Department of Justice or the Agency has agreed to represent the employee; or the U.S. when the Agency determines that litigation is likely to affect the Agency or any of its components, is a party to litigation, and has an interest in such litigation, and the use of such records by the Department of Justice or the Agency is deemed by the Agency to be relevant and necessary to the litigation provided, however, that the disclosure is compatible with the purpose for which the records were collected.

Whenever VA is involved in litigation, or occasionally when another party is involved in litigation and VA policies or operations could be affected by the outcome of the litigation, VA would be able to disclose information to the court or parties involved. A determination would be made in each instance that, under the circumstances involved, the purpose served by the use of the information in the particular litigation is compatible with a purpose for which VA collects the information.

8. To individuals, organizations, private or public agencies, etc., with

whom VA has a contract or agreement to perform such services as VA may deem practicable for the purposes of laws administered by VA, in order for the contractor or subcontractor to perform the services of the contract or agreement.

VA must be able to provide information to contractors or subcontractors with whom VA has a contract or agreement in order to perform the services of the contract or agreement.

Release of information from these records will be made only in accordance with the provisions of the Privacy Act of 1974 for investigative, judicial and administrative uses. The Privacy Act permits us to disclose information about individuals without their consent for a routine use when the information will be used for a purpose that is compatible with the purpose for which we collected the information. In all of the routine use disclosures described above, either the recipient of the information will use the information in connection with a matter relating to one of VA's programs, will use the information to provide a benefit to VA, or disclosure is required by law. VA has determined that release of information for these purposes is a necessary and proper use of information and that specific routine uses for transfer of this information are appropriate.

Approved: December 15, 2000.
Hershel W. Gober,
Acting Secretary of Veterans Affairs.

97VA105

SYSTEM NAME:

Consolidated Data Information System-VA.

SYSTEM LOCATION(S):

Records will be maintained at the following computer site locations: VA Management Science Group, 200 Springs Road, Bedford, Massachusetts 01730; and VA Information Resource Center, 5th Avenue & Roosevelt Road, Hines, Illinois 60141. Copies or parts of these records may be maintained at the following computer site locations: VA Automation Center, 1615 Woodward Street, Austin, Texas 78722; and VA Allocation Resource Center, 100 Grandview Road, Braintree, Massachusetts 02184.

CATEGORIES OF INDIVIDUALS COVERED BY THE SYSTEM:

The records include information concerning active duty military personnel, veterans, their spouses and their dependents, and individuals who are not VA beneficiaries, but who receive health care services from VHA.

CATEGORIES OF RECORDS IN THE SYSTEM:

The categories of records in the system will include veterans' names, addresses, dates of birth, VA claim numbers, SSNs, and military service information; medical benefit application and eligibility information; code sheets and follow-up notes; sociological, diagnostic, counseling, rehabilitation, drug and alcohol, dietetic, medical, surgical, dental, psychological, and/or psychiatric medical information; prosthetic, pharmacy, nuclear medicine, social work, clinical laboratory and radiology information; patient scheduling information; family information such as next of kin, spouse and dependents; names, addresses, social security numbers and dates of birth; family medical history, employment information; financial information; third-party health plan information; information related to ionizing radiation and Agent Orange; date of death; VA claim and insurance file numbers; travel benefits information; military decorations; disability or pension payment information; information on indebtedness arising from 38 U.S.C. benefits; medical and dental treatment in the Armed Forces and claim information; applications for compensation, pension, education and rehabilitation benefits; information related to incarceration in a penal institution; medication profile such as name, quantity, prescriber, dosage, manufacturer, lot number, cost and administration instruction; pharmacy dispensing information such as pharmacy name and address.

The records will include information on DoD military personnel from two categories of DoD files: (1) Utilization files that contain inpatient and outpatient records, and (2) eligibility files from the Defense Eligibility Enrollment Reporting System (DEERS) containing data on all military personnel including those discharged from the Armed Services since 1972.

The records will include information on Medicare beneficiaries from HCFA databases: Denominator file (identifies the population being studied); Standard Analytical files (inpatient, outpatient, physician supplier, nursing home, hospice, home care, durable medical equipment); and Group Health Plan.

The records include information on Medicaid beneficiaries' utilization and enrollment from state databases.

AUTHORITY FOR MAINTENANCE OF THE SYSTEM:

Section 527 of 38 U.S.C. and the Government Performance and Results Act of 1993, Pub. L. 103-62.

PURPOSE(S):

The purpose of this system of records is to conduct statistical studies and analyses which will support the formulation of Departmental policies and plans by identifying the total current health care usage of the VA patient population.

ROUTINE USES OF RECORDS MAINTAINED IN THE SYSTEM, INCLUDING CATEGORIES OF USERS AND THE PURPOSE OF SUCH USES:

Information from this system of records may be disclosed in accordance with the following routine uses:

1. Disclosure of identifying information, such as names, SSNs, demographic and utilization data, may be made to Federal, State, local, or tribal agencies such as the DoD, HCFA, and Medicare Payment Advisory Commission (MedPAC), as part of statistical matching programs for the purpose of better identifying the total current health care usage of the patient population served by VA in order to forecast future demand for VA medical care by VA medical facilities.

2. Disclosure may be made to Federal, State, local, and tribal government agencies and national health organizations in order to assist in the development of programs that will be beneficial to claimants and assure that they are receiving all benefits to which they are entitled.

3. Disclosure may be made of information relevant to or indicating a violation or potential violation of law, whether civil, criminal or regulatory in nature, and whether arising by general statute or particular program statute, or by regulation, rule or order issued pursuant thereto, to Federal, State, local, or tribal agencies charged with the responsibility of investigating or prosecuting such violation or charged with enforcing or implementing the statute, or rule, regulation or order listed pursuant thereto.

4. Disclosure may be made, excluding name and address (unless name and address are furnished by the requester) for research purposes determined to be necessary and proper, to epidemiological and other research facilities approved by the Under Secretary for Health.

5. In order to conduct Federal research necessary to accomplish a statutory purpose of an agency, at the written request of the recipient agency, the name (s) and address (s) of present or former personnel of the Armed Services and/or their dependents may be disclosed (a) To a Federal department or agency or (b) directly to a contractor of a Federal department or agency. When disclosure of this information is

to be made directly to the contractor, VA may impose applicable conditions on the department, agency and/or contractor to insure the appropriateness of the disclosure to the contractor.

6. Disclosure may be made to National Archives and Records Administration (NARA), General Services Administration (GSA) in records management inspections conducted under authority of 44 U.S.C. 2904 and 2906.

7. Records from this system of records may be disclosed to the Department of Justice or in a proceeding before a court, adjudicative body, or other administrative body before which the Agency is authorized to appear when: The Agency, or any component thereof; or any employee of the Agency in his or her official capacity; where the Department of Justice or the Agency has agreed to represent the employee; or the U.S. when the Agency determines that litigation is likely to affect the Agency or any of its components, is a party to litigation, and has an interest in such litigation, and the use of such records by the Department of Justice or the Agency is deemed by the Agency to be relevant and necessary to the litigation provided, however, that the disclosure is compatible with the purpose for which the records were collected.

8. Disclosure may be made to individuals, organizations, private or public agencies, etc., with whom VA has a contract or agreement to perform such services as VA may deem practicable for the purposes of laws administered by VA, in order for the contractor or subcontractor to perform the services of the contract or agreement.

POLICIES AND PRACTICES FOR STORING, RETRIEVING, ACCESSING, RETAINING AND DISPOSING OF RECORDS IN THE SYSTEM:**STORAGE:**

Data are maintained on magnetic tape, disk, or laser optical media.

RETRIEVABILITY:

Records may be retrieved by name, name and one or more criteria (e.g., dates of birth, death and service), SSN or VA claim number.

SAFEGUARDS:

1. Access to and use of these records is limited to those persons whose official duties require such access. Personnel screening is employed to prevent unauthorized disclosure.

2. Access to Automated Data Processing files is controlled at two levels: (1) Terminals, central processing units, and peripheral devices are generally placed in secure areas (areas

that are locked or have limited access) or are otherwise protected; and (2) the system recognizes authorized users by means of an individually unique password entered in combination with an individually unique user identification code.

3. Access to automated records concerning identification codes and codes used to access various VA automated communications systems and records systems, as well as security profiles and possible security violations is limited to designated automated systems security personnel who need to know the information in order to maintain and monitor the security of VA's automated communications and veterans' claim records systems. Access to these records in automated form is controlled by individually unique passwords/codes. Agency personnel may have access to the information on a need to know basis when necessary to advise agency security personnel or for use to suspend or revoke access privileges or to make disclosures authorized by a routine use.

4. Access to VA facilities where identification codes, passwords, security profiles and possible security violations are maintained is controlled at all hours by the Federal Protective Service, VA or other security personnel and security access control devices.

RETENTION AND DISPOSAL:

Copies of back-up computer files will be maintained at VA Management Science Group, Bedford, Massachusetts, and VA Information Resource Center, Hines, Illinois.

Records will be maintained and disposed of in accordance with the records disposal authority approved by the Archivist of the United States, the National Archives and Records Administration, and published in Agency Records Control Schedules.

SYSTEM MANAGER AND ADDRESS:

Director, Management Science Group, VA Medical Center, 200 Springs Road, Bedford, Massachusetts 01730.

NOTIFICATION PROCEDURE:

Individuals wishing to inquire whether this system of records contains information about them should submit a signed written request to the Director, Management Science Group, VA Medical Center, 200 Springs Road, Bedford, Massachusetts 01730.

RECORDS ACCESS PROCEDURES:

An individual who seeks access to records maintained under his or her name or other personal identifier may write the System Manager named above

and specify the information being contested.

CONTESTING RECORD PROCEDURES:

(See Records Access Procedures above.)

RECORD SOURCE CATEGORIES:

Information may be obtained from the Patient Medical Records System (24VA136); Patient Fee Basis Medical and Pharmacy Records (23VA136); Veterans and Beneficiaries Identification and Records Location Subsystem (38VA23); Compensation, Pension, Education and Rehabilitation Records (58VA21/22); and Automated Medication Processing Records (56VA119); DoD utilization files and DEERS files; and HCFA Denominator file, Standard Analytical files (inpatient, outpatient, physician supplier, nursing home, hospice, home care, durable medical equipment) and Group Health Plan, and State Medicaid beneficiaries' utilization and enrollment databases.

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BILLING CODE 8320-01-M

DEPARTMENT OF VETERANS AFFAIRS

Privacy Act of 1974; System of Records

AGENCY: Department of Veterans Affairs (VA).

ACTION: Notice of New System of Records "Agent Orange Registry—VA".

SUMMARY: The Privacy Act of 1974 (5 U.S.C. 552(e)(4)) requires that all agencies publish in the Federal Register a notice of the existence and character of their systems of records. Notice is hereby given that the Department of Veterans Affairs (VA) is establishing a new system of records entitled, "Agent Orange Registry—VA" (105VA131).

DATES: Comments on the establishment of this system of records must be received no later than February 15, 2001. If no public comment is received, the new system will become effective February 15, 2001.

ADDRESSES: Written comments concerning the proposed new system of records may be submitted to the Office of Regulations management (O2D), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420. Comments will be available for public inspection at the above address in the Office of Regulatory Management, Room 1158, between the hours of 8 a.m. and 4:30 p.m., Monday through Friday (except holidays).

FOR FURTHER INFORMATION CONTACT: Veterans Health Administration Privacy

Act Officer (193B2), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (727) 320-1839.

SUPPLEMENTARY INFORMATION:

1. Description of the Proposed Systems of Records.

The Agent Orange Registry located at the Austin Automation Center (AAC), Austin, Texas, is an automated integrated system containing demographic and medical data of registry examinations from 1988 until such time as the VA Secretary or Congress by law ends the registry program. These data were entered manually on code sheets by VA facility staff and copies sent to the AAC for entry into the Agent Orange Registry data set.

The purpose of this Agent Orange Registry system of records is to provide information about veterans who have had an Agent Orange Registry examination at a VA facility; to assist in generating hypotheses for research studies; provide management with the capability to track patient demographics; report birth defects among veteran's children; dioxin-related diseases; planning and delivery of health care services and associated costs; and with relation to claims for compensation may assist in the adjudication of claims possibly related to herbicide exposure although more comprehensive medical records are required for evaluation of subject claims.

II. Proposed Routine Use Disclosures of Data in the System

We are proposing to establish the following routine use disclosures of information which will be maintained in the system:

1. The record of an individual who is covered by this system may be disclosed to a member of Congress or staff person acting for the member when the member of staff person requests the record on behalf of, and at the written request of, that individual.

Individuals sometimes request the help of a member of Congress in resolving some issue relating to a matter before VA. The member of Congress then writes VA, and VA must be able to give sufficient information to be responsive to the inquiry.

2. Disclosure of records covered by this system, as deemed necessary and proper to named individuals serving as accredited service organization representatives and other individuals named as approved agents or attorneys for a documented purpose and period of time, to aid beneficiaries in the

Appendix D
Data Linkage Processes

Appendix D Data Linkage Processes

Data Linkage Process at CMS for Matching Veterans SSN to CMS Health Insurance Claim Account Numbers (HIC)

The procedures for the VA-Medicare beneficiary linkage begin with the submission of the sampling frame to CMS. We divide these linkage steps into those performed at CMS and those performed at VIREC, which are summarized here:

CMS improved its process for matching SSNs to CMS Health Insurance Claim Account Number (HIC) codes during 2001. Although MSG had provided VIREC some cross-reference information based on their earlier searches at CMS, VIREC submitted an updated request directly to CMS in August 2002. VIREC submitted an 80-character sampling frame with 6,411,210 SSNs, dates of birth and genders to CMS with a request to provide cross-reference information.

File	Variables	Observations
VIREC sampling frame	SSN, date of birth, gender	6,411,210 SSNs

The SSNs were used to search against the CMS Enrollment Data Base (EDB) to obtain the current (as of the date of the search, in our case it was as of August 2002) HIC code (current-HIC) for each person in the sampling frame, creating an SSN Conversion File. The current-HIC in this SSN Conversion file is then used to perform a HIC cross-reference search using the CMS HIC Cross-reference File to obtain all HICs used previously by this person (all-found HICs), i.e., any HICs used prior to August 2002. Use of other HICs occurs when a beneficiary's justification for Medicare benefits changes (if a person originally claims benefits under his/her own work history and then shifts to claim it under his/her spouse's history). A HIC would also change if dependent status changes, as in when a wife becomes a widow. The result of this search is a HIC Cross-reference File for our sampling frame. All of the HICs in the HIC Cross-reference File are then used to search the CMS EDB and claims files. The current-HIC is also used to search the CMS Vital Status File for demographic data for each person found.

VIREC received the following files from CMS resulting from their linkage procedures for CY 1999:

Files	Variables	Observations
SSN Conversion File, as of 8/2002	SSN and current-HIC	3,438,257 unique SSN-HIC combinations
HIC Cross-reference File, as of 8/2002	Current-HIC and all-found HICs	3,538,956 unique all-found-HICs
Vital Status File, as of 8/2002	Current-HIC and demographics	3,438,304 unique HICs

The Medicare Denominator file received from MSG includes veterans not in the VIREC cohort. Since this was a cumulative file that MSG had worked with on multiple projects, this file included some SSNs from prior to 1997, that is, outside of our sampling frame. The SSNs not in

our sampling frame were excluded. Since this file was created in May 2000 there was no need to go back to CMS to regenerate this file.

File	Variables	Observations
Denominator File, as of 5/2000	HIC (at close of yearly files) and demographics	3,721,737 unique HICs

VIREC Process for Linking VA Records to Medicare Records:

Using these four CMS constructed files, VIREC linked Medicare records to the VA healthcare records. The attached flow chart describes this process graphically (Figure 1). In Step 1, VIREC merged the SSN Conversion file with the HIC Cross-Reference file on current-HIC to create the VIREC Final Cross-reference File containing SSN and each HIC ever assigned to that SSN (all-found-HICs). Duplicate combinations of SSN and all-found-HIC were removed. This matching process yielded 3,538,956 combinations of SSN and HIC in our VIREC Final Cross-reference file.

An important although technical detail is that in the process of linking the SSN Conversion File to the HIC Cross-reference File, we found what appears to be a CMS error in file creation. We found that 76,705 current-HICs in the SSN Conversion file were not included in the “all-found-HIC” variable. We consulted with our Technical Advisory Board and it was agreed that this finding is contrary to CMS’s documentation about the relationship between these two variables. New records were created for these current-HICs to ensure all HICs associated with an SSN would be included in the VIREC Final Cross-reference File. This resulted in 3,615,661 unique combinations of all-found-HIC and SSN, for 3,437,907 persons (unique SSNs). We are following up on this technical issue with CMS. In summary, although important, this process did not change our SSN yield. As in other data linking projects, and in particular with VA-Medicare linking projects, errors can be identified fixed. The bottom line is this process does not affect our “person count”.

In Step 2, the VIREC Final Cross-reference File was merged with the CMS Vital Status File on current-HIC to add demographic data. This merge yielded 3,437,907 persons (unique SSNs) in the VIREC Final Cross-reference with CMS Vital Status Data File (i.e. vital status data was appended to each matching record) that we could then use for checking our match to VA records.

This merged file (VIREC Final Cross-reference with CMS Vital Status Data File) was then merged to the CMS CY 1999 Denominator File on all-found-HIC to add CMS 1999 enrollment information. This process yielded 2,771,358 persons (unique SSNs), i.e., veterans in our sample enrolled in Medicare during 1999.

As is common practice when merging multiple databases, we used additional information from VA databases to verify that when SSNs matched, both information systems described the same person. We constructed a VA Demographic Data File that included SSN, gender, date of birth, and date of death information. See Appendix E for details on construction of this file.

To determine that both information systems described the same person, we merged the VIREC Final Cross-reference with CMS Vital Status and Enrollment Data File, to our VA Demographics Data File by SSN. Each matched pair was compared using combinations of demographic

variables in a hierarchy shown in the Cumulative Matching Hierarchy Table below. The match criteria, recommended by VIREC's Technical Advisory Board and consistent with the methods of Fisher and Fleming (1992), restricted the acceptable match to those records with matching SSN plus gender plus 2 of the 3 parts of the date of birth (day, month, year). This cumulative matching hierarchy yielded 2,611,146 unique SSNs for persons alive on January 1, 1999. These matching criteria are considered conservative and the probability of establishing a match for two different individuals is close to zero.

Cumulative Matching Hierarchy Table

CUMULATIVE_MATCH	Frequency	Percent	Cumulative Frequency	Cumulative Percent
A) GENDER + DOB	2,408,706	87.05%	2,408,706	87.05%
B) GENDER + DOB YEAR + MONTH	135,101	4.88%	2,543,807	91.93%
C) GENDER + DOB MONTH + DAY	51,585	1.86%	2,595,392	93.80%
D) GENDER + DOB YEAR + DAY	15,754	0.57%	2,611,146	94.36%
E) GENDER + DOB YEAR	26,341	0.95%	2,637,487	95.32%
F) DATE OF BIRTH MATCH	4,114	0.15%	2,641,601	95.47%
G) DATE OF DEATH MATCH	5,930	0.21%	2,647,531	95.68%
H) GENDER + DOB MONTH	11,943	0.43%	2,659,474	96.11%
I) GENDER + DOB DAY	2,291	0.08%	2,661,765	96.19%
J) DOB YEAR + MONTH	327	0.01%	2,662,092	96.21%
K) DOB MONTH + DAY	100	0.00%	2,662,192	96.21%
L) DOB YEAR + DAY	36	0.00%	2,662,228	96.21%
M) DOB YEAR	322	0.01%	2,662,550	96.22%
N) GENDER MATCH	99,571	3.60%	2,762,121	99.82%
Z) NONE OF ABOVE MATCHED	4,952	0.18%	2,767,073	100.00%

Appendix E

Variable Construction and Data Sources

Appendix E

Variable Construction and Data Sources

As the SSNs making up the sampling frame/finder file were pulled together from the four VA data sources described in Table 1, demographic data on each person were also included, to the extent they were available. These variables included gender, date of birth, service connectedness, priority level, and ZIP code. Since individual SSNs in the sample might be found in multiple VA data sources, which might result in multiple values for the same variable, an algorithm was developed to arrive at a “final” value for each of the key analysis variables. The general hierarchy developed placed the Office of Policy and Planning Fiscal Year 1999 Enrollment File (ENRL99) as the primary source, followed by the VISN Support Service Center Unique User File (UU97-UU00), the Allocation Resource Center Pharmacy Only Users File (ARC97-ARC99), and finally, the Veterans Benefits Administration Compensation and Pension Non-Users File (CPNON). Since Medicare data follows calendar year and VHA data files are based on fiscal year, the data for a single calendar year was gathered from two fiscal year VA files, FY1999 and FY2000. A secondary hierarchy was developed so that all of the data files for the more recent years were examined first, then the general file hierarchy was applied to the next year’s files. Not all data sources have files for each year. Thus, adjustments have been made to derive the best sources of the data in the correct time frame. The following is a description of the unique situations faced and method followed in deriving the “final” value for each variable used in the rows of Tables 3-8.

SECTION I: ZIP CODE: Used to derive VISN, TYPE OF ZIP CODE, and DISTANCE

ZIP CODE: ZIP code was derived based on:

- 1) ENRL99 has two variables for ZIP. The one used here was determined by the value of an additional flag variable in the ENRL99 file.
- 2) UU99_ZIP was used next if ENRL99 did not have a ZIP code.
- 3) ARC99_ZIP was used next if UU99 did not have a ZIP code.
- 4) UU00_ZIP was used next if ARC99 did not have a ZIP code.
- 5) UU98_ZIP was used next if UU00 did not have a ZIP code.
- 6) ARC98_ZIP was used next if UU98 did not have a ZIP code.
- 7) UU97_ZIP was used next if ARC98 did not have a ZIP code.
- 8) ARC97_ZIP was used next if UU97 did not have a ZIP code.
- 9) UNIQOTHER_ZIP was used next if ARC97 did not have a ZIP code.
- 10) CPNON_ZIP was used next if UNIQOTHER did not have a ZIP code.

It must be noted that, as of 2003, only approximately 43,000 ZIP codes of the possible 100,000 ZIP code values between 0-99999 have been assigned. So a five-digit number may look like a ZIP code but may not be valid. For example, 60141 is a valid ZIP code for the city Hines, IL; however there is no city with a ZIP code of 60149. Because 60149 looks like a valid ZIP code but is not, calculation of all associated variables, like VISN, county, urban/rural area, Metropolitan Statistical Area (MSA), distance to closest inpatient facility and closest outpatient facility, are affected. About 1.82% of the VIREC sampling frame did not have a valid ZIP code.

Having valid ZIP codes enabled linking to two data files from the Office of Policy and Planning's Planning Systems Support Group (OPP/PSSG); the ZIP code file (ZIP_D122600) and the Geographical Access Enrollment Database (GAED). We linked the veterans' ZIP codes to the following data elements:

- A. VISN: The variable ZIPVISN from the ZIP_D122600 file provides the VISN assigned to each ZIP code. VISNs are defined as the location of the veterans' residence, not by where they utilize services. Because the ENRL99 and the UU97-UU00 files have VISN variables, the ZIP code is not the only source for a VISN assignment. Where it was needed because of missing ZIP code, the algorithm for VISN assignment was as follows:
1. ENRL99_VISN_D
 2. UU99_VISN
 3. UU00_VISN
 4. UU98_VISN
 5. UU97_VISN

After the above algorithm was executed, 0.76% of the VIREC sampling frame still did not have a VISN assignment.

- B. Type of ZIP code: Using the variable TYPE_ZIP from the GAED we were able to determine if a ZIP code was urban or rural.
- C. Distance to the nearest outpatient facility: The variable OPCD from the ZIP_D122600 file provides the straight line distance from the veteran's ZIP code to the closest VA outpatient facility.
- D. Distance to the nearest inpatient facility: The variable MCCD from the ZIP_D122600 file provides the straight line distance from the veteran's ZIP code to the closest VA inpatient facility.
- E. FIPS Code: This variable, found in the ZIP_D122600 file, provides county identifiers (FIPS). Because each VISN is a collection of counties, this variable was used to define VISN boundaries for Geographical Information Systems (GIS) mapping applications.

SECTION II: DATE OF BIRTH: Used to derive AGE

DATE OF BIRTH (DOB): The DOB and AGE variables are interlinked. The objective was to derive the most suitable DOB based either on the hierarchy of all sources of DOB available in the data, or when DOB was missing, to estimate the DOB based on the AGE variable available in some of the databases. The final AGE of the individual was calculated (as of January 1st, 1999) using the derived DOB. Hence the complete algorithm was as follows:

1. ENRL99_DOB: full date of birth: month, day and year

2. VBA_DOB: full date of birth: month, day and year
3. BIRLDOB: full date of birth: month, day and year
4. UU99_BORNDAY: month and year only
5. UU00_BORNDAY: month and year only
6. UU98_BORNDAY: month and year only
7. UU97_BORNDAY: month and year only
8. CPNON_VTBIRTH: month and year only
9. ENRL99_AGE
10. ARC99_AGE
11. ARC98_AGE
12. ARC97_AGE

By using the algorithm, DOB remained missing for 1.9% of the VIREC sampling frame.

SECTION III: GENDER

GENDER: The variable gender is included in all data sources. The order of selection was:

1. ENRL99_SEX
2. UU99_SEX
3. ARC99_SEX
4. UU00_SEX
5. UU98_SEX
6. ARC98_SEX
7. UU97_SEX
8. ARC97_SEX
9. CPNON_VETSEX

Using the above algorithm GENDER was defined as M=MALE and F=FEMALE. Any other codes or missing data were classified as UNKNOWN (0.1%).

SECTION IV: PRIORITY LEVEL/SERVICE CONNECTED/MEANS TEST: Used to derive CONSTRUCTED PRIORITY LEVEL

The creation of the Constructed Priority Level variable required the use of three interconnected variables: Priority, Means Test and Service Connected. They were derived individually, described in the hierarchy below.

- A. PRIORITY: Priority levels 1-7 were available from the Enrollment file (ENRL99).
- B. MEANS TEST: This variable had two sources: ENRL99 and Unique User (UU97-UU00) Files. The order of selection was:
 1. ENRL99_MTSTATUS
 2. UU99_MEANS
 3. UU00_MEANS
 4. UU98_MEANS

5. UU97_MEANS

C. SERVICE CONNECTED: This variable had two sources: ENRL99 and ARC Pharmacy files. The order of selection was:

1. ENRL99_SCPER
2. ARC99_SERVCON
3. ARC98_SERVCON
4. ARC97_SERVCON

CONSTRUCTED PRIORITY LEVEL HIGH/LOW: This variable divided the veterans into three classes based on the variables listed above.

1. Constructed Priority Level: High: Includes all veterans who had a value between 1-6 on the PRIORITY variable (from A, above). Or, if PRIORITY was missing, they had a value of *Category A* on the variable MEANS TEST (from B) or a value between 10-100% on the variable SERVICE CONNECTED (from C).
2. Constructed Priority Level: Low: Includes all veterans who had a value of 7 on the PRIORITY variable (from A). Or, if PRIORITY was missing, they had a MEANS TEST (from B) with a value of *Category C*.
3. Missing: Includes veterans with PRIORITY (from A), MEANS TEST (from B), and SERVICE CONNECTED (from C) values were either missing or not in the range specified above.

Using this algorithm it was found that 34.24% of the SSNs did not have a value between 1-7 for the variable PRIORITY. By classifying the priority levels into high/low categories on the PRIORITY variable and by using the means test and service-connected values to derive high/low priority categories when applicable (as shown above), the missing data for CONSTRUCTED PRIORITY LEVEL HIGH/LOW was reduced to 25.8%.

Appendix F

List of Veterans Integrated Service Networks (VISNs)

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- VISN 1: VA New England Healthcare System
- VISN 2: VA Healthcare Network Upstate New York
- VISN 3: VA NY/NJ Veterans Healthcare Network
- VISN 4: VA Stars & Stripes Healthcare Network
- VISN 5: VA Capitol Health Care Network
- VISN 6: VA Mid-Atlantic Health Care Network
- VISN 7: The Atlanta Network
- VISN 8: VA Sunshine Healthcare Network
- VISN 9: VA Mid South Healthcare Network
- VISN 10: VA Healthcare System of Ohio
- VISN 11: Veterans In Partnership
- VISN 12: The Great Lakes Health Care System
- VISN 13: VA Upper Midwest Health Care Network
- VISN 14: Central Plains Health Network
- VISN 15: VA Heartland Network
- VISN 16: South Central VA Health Care Network
- VISN 17: VA Heart of Texas Health Care Network
- VISN 18: VA Southwest Health Care Network
- VISN 19: Rocky Mountain Network
- VISN 20: Northwest Network
- VISN 21: Sierra Pacific Network
- VISN 22: Desert Pacific Healthcare Network